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## DUNGLISON'S PHYSIOLOGY.

CAREY, LEA & BLANCHARD have lately published a second edition of Human Physiology, illustrated by numerous engravings. By Robley Dunglison, M. D., Professor of Therapeutics, Materia Medica, Hygiene, and Medical Jurisprudence in the University of Maryland, &c. &c. (Now Professor of the Institutes of Medicine and Medical Jurisprudence in Jefferson Medical College, Philadelphia.) In two vols. 8vo.

"It is the most complete and satisfactory system of Physiology in the English language. It will add to the already high reputation of the author. We feel warranted in recommending the work to the student of physiology as being one of the very best text books with which we are acquainted; while we are persuaded its very superior merits will command for it a place in every medical library."—*American Journal of the Medical Sciences*.

"A work, like this, so abounding in important facts, so correct in its principles, and so free from errors arising from prejudice to favourite opinions, will be cordially received and extensively consulted by the profession, and by all who are desirous of a knowledge of the functions of the human body; and those who are the best qualified to judge of its merits, will pronounce it the best work of the kind in the English language."—*Silliman*.

"This is a work of no common standing; it is characterised by much learning and research, contains a vast amount of important matter, and is written by a scholar and a man of taste. We are inclined to think that it will be placed by general consent at the head of the systems of Physiology, now extant in the English language. Nor are we prepared to say that, all things considered, its superior exists in any language. It has a character of its own, and is a true Anglo-American production, unsophisticated by gairish foreignism."—*Transylvania Journal*.

## ELEMENTS OF HYGIENE.

On the Influence of Atmosphere and Locality; Change of Air and Climate, Seasons, Food, Clothing, Bathing, Exercise, Sleep, Corporeal and Intellectual Pursuits, etc. on Human Health, constituting Elements of Hygiene. By Robley Dunglison, M. D., Professor of Materia Medica, Therapeutics, Hygiene, and Medical Jurisprudence in the University of Maryland, etc. 1 vol. octavo.

"On many points connected with statistics and climate, we might transfer from Dr. Dunglison's pages highly interesting observations and facts, and he generally exercises a very sound judgment where discordant opinions have existed among previous writers. The Hygienic cautions, scattered through his work, are useful and judicious, and we do not know so complete a text-book of Hygiene as that which he has prepared. We have already spoken in commendation of the dietetic portion of his work, and have only to add, that the chapters on Clothing, Bathing, and Exercise, contain numerous particulars interesting to the medical practitioner and to the public. Every subject seems well considered; nothing is neglected, and nothing is pushed to extravagance."—*The British and Foreign Review*, No. 2. April, 1836.

"We can recommend this work to the public with the utmost confidence, as one of the best treatises on the subject we possess."—*American Journal of the Medical Sciences*, February, 1835.

"It is a book, therefore, interesting to the general reader; and, however popular and useful may have been the unrivalled work of Dr. Dewees on Children, we hazard little in predicting that this work will be still more extensively sought and read."—*Boston Medical Magazine*.

"Professor Dunglison has displayed much judgment and ability in selecting and digesting his materials; and has furnished a better exposition of the elements of Hygiene than can be any where found in the English language."—*North American Archives for Medical and Surgical Science*, for March, 1835.

"The extent and variety of the work are sufficient to embrace whatever is most material, as well to the health of communities as of individuals: and all the topics,

## ADVERTISEMENT.

numerous and multifarious as they are, are handled with learning, judgment, and skill. The chief value of the performance (the highest, indeed, that it could possess) consists in its being *practical in matter*, and perfectly perspicuous in style and manner. \* \* Having felt ourselves justified in remarking, on a former occasion, that we considered Professor Dunglison's *System of Human Physiology* the best in the English language, it is gratifying to us to be able to say the same, now, of his '*Elements of Hygiene*.' We know of no other work on the subject which the English reader can peruse with equal advantage. \* \*

"We shall close this article by again very cordially commending the *Elements of Hygiene* to public attention."—*Transylvania Journal of Medicine*, Vol. 8, No. 4.

"In Professor Dunglison's '*Elements of Hygiene*,' the reader will find a great variety of very useful information on all the branches of the subject. The remarks on the different kinds of food and drink, are among the best which I have met with." Dr. A. COMBE; *Physiology of Digestion*, &c. 1836. New York edition, p. 270.

## GENERAL THERAPEUTICS.

General Therapeutics, or Principles of Medical Practice, with tables of the chief remedial agents and their preparations, and of the different poisons and their antidotes. By Robley Dunglison, M. D. &c. &c. One volume, large 8vo.

"There being at present before the public several American works on Therapeutics, written by physicians and teachers of distinction, it might be deemed unjust in us, and would certainly be invidious, to pronounce any one of them superior to the others. We shall not, therefore, do so. If there be, however, in the English language, any work of the kind more valuable than that we have been examining, its title is unknown to us.

"We hope to be able to give such an account of the work as will strengthen the desire and determination of our readers to seek for a farther acquaintance with it, by a candid perusal of the volume itself. And, in so doing, we offer them an assurance that they will be amply rewarded for their time and labour."—*Transylvania Journal*, Vol. IX. No. 3. Dec. 1836.

"Few writers in our profession have been more industrious than Professor Dunglison, and fewer still have sustained themselves equally well in the course of so many practical publications. From the hasty perusal which we have given it, we are inclined to think that it possesses equal if not superior merit to any which have preceded it from the prolific pen of its author.

\* \* It shows the learning and research of its author on every page, and as an eclectic production it will bear comparison with similar works in any country. We would advise our readers to purchase and peruse it for themselves."—*Western Journal of the Medical Sciences*, No. XXXVIII. p. 252, for September, 1836.

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LATELY PUBLISHED IN BOSTON, AND FOR SALE BY ALL THE BOOKSELLERS,

A new Dictionary of Medical Science and Literature, containing a concise account of the various subjects and terms; with the synonyms in different languages, and formulæ for various officinal and empirical preparations, etc. etc. By Robley Dunglison, M. D. etc. etc. In two volumes, octavo, containing above 1200 pages.

"This is an excellent compilation, and one that cannot fail to be very much referred to. It is the best medical lexicon in the English language that has yet appeared. We do not know any volume which contains so much information in a small compass. Altogether, we can recommend to every medical man to have this work by him, as the cheapest and best dictionary of reference he can have." *London Medical and Surgical Journal*.

THE  
MEDICAL STUDENT;

OR,

AIDS TO THE STUDY OF MEDICINE.

INCLUDING

A GLOSSARY OF THE TERMS OF THE SCIENCE, AND OF THE MODE OF PRE-  
SCRIBING,—BIBLIOGRAPHICAL NOTICES OF MEDICAL WORKS;  
THE REGULATIONS OF DIFFERENT MEDICAL  
COLLEGES OF THE UNION, &c. &c.

BY

ROBLEY DUNGLISON, M. D.

PROFESSOR OF THE INSTITUTES OF MEDICINE AND MEDICAL JURISPRUDENCE IN JEFFERSON  
MEDICAL COLLEGE; LATELY PROFESSOR OF MATERIA MEDICA, THERAPEUTICS,  
HYGIENE, AND MEDICAL JURISPRUDENCE IN THE UNIVERSITY OF  
MARYLAND, AND FORMERLY PROFESSOR OF PHYSIOLOGY, PATHO-  
LOGY, OBSTETRICS, AND MEDICAL JURISPRUDENCE IN THE  
UNIVERSITY OF VIRGINIA, &c. &c.

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PHILADELPHIA:  
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TO  
THOSE GENTLEMEN—THROUGHOUT THE UNION—  
WHO ARE ALREADY ENGAGED IN, OR ABOUT TO COMMENCE, THE  
STUDY OF MEDICINE,  
THE FOLLOWING AIDS  
TO THE  
ACQUISITION OF PROFESSIONAL KNOWLEDGE AND DISTINCTION,  
ARE RESPECTFULLY DEDICATED,  
BY  
THE AUTHOR.





## PREFACE.

IN this humble production, as in the Author's more elaborate works on Physiology, Hygiene, and Therapeutics, and in his Medical Dictionary, his sole aim has been utility. He has been desirous of facilitating the labours of the young student in prosecuting a difficult profession, without any expectation that his labours would meet with much regard from the more advanced.

From an early period of his professional career, the Author has been so situated, that every effort has been directed to the advancement of the student, and if he has smoothed away difficulties from his path, he feels himself amply repaid. He seeks—he desires—no other commendation.

In all his productions, he has endeavoured to compile, from the best sources, the facts and reflections, which may be looked upon as constituting the existing state of the science, without wandering into idle speculation, which would be obviously out of place in works destined as text-books for the in-

struction of the tyro, and for reference to the more advanced student, although they might communicate to his volumes a greater appearance of originality. In all cases, however, he has exerted his best judgment, either in adopting the opinions of others, or in opposing them, where accordance did not appear to be admissible.

The present work originated in the applications, made to the Author for his opinions, as to the best method of study for one about to enter upon professional life, as well as for one engaged in its prosecution. Not long ago, he received a letter from a young gentleman, requesting such information, and asking the Author's permission for promulgating it to the world. This was declined; but the proposition had some influence in producing the present observations on Medical Education. Parts of them likewise formed portions of an introductory, and of a valedictory, lecture, delivered to his class, in November and February last, copies of which were formally solicited for publication; solicitations which he respectfully declined, wishing that they might appear before them in a more useful shape.

The whole of his observations apply to the Study of Medicine as taught in this country. The Author has entered into no speculations as to what

Medical Education ought to be. The work is intended simply as some guide to the American medical student, who too frequently is totally uninformed as to the course he ought to pursue—not only when he commences to read upon his profession, but when he enters a Medical College for the prosecution of his studies there.

Restricted as the subject of the volume may be regarded, it constitutes, in the medical institutions of some countries, the duties of a separate chair. In Berlin, there are two Professors, regularly occupied through the winter session in teaching. Hecker, one of the ‘Ordinary Professors,’ who teaches publicly ‘*Encyclopædiam et Methodologiam Medicam*’ every Wednesday and Saturday,—and Kranichfeld, one of the Extraordinary Professors, who lectures on ‘*Medical Methodology*’ every Tuesday and Thursday.\*

In the Bibliographical department, the Author has been anxious to give the student a short account of several of the books in the English language—indigenous and imported—which are placed before him in the ordinary bookstores, or which

\* Index lectionum quæ auspiciis Regis augustissimi FREDERICI GUILIELMI TERTII in universitate litteraria Frederici Guiljelmi per semestre hibernum A. D. MDCXXXV. MDCCCXXXVI, &c. &c. instituentur. p. 12, & p. 14.

he sees, from time to time, advertised in the catalogues. It has always appeared to him, that the brief Bibliography, in the second volume of the work on Natural Philosophy, of Dr. Thomas Young,—one of the most accomplished physicians, by the way, that ever graced the ranks of the profession—was far from being the least useful portion.

In this part of the volume, the Author has said nothing of the valuable works of antiquity, or of the standard polygraphic productions of such men as BOERHAAVE, HALLER, SYDENHAM, CULLEN, RUSH, and others. Their character is too well known to render comment necessary.

ROBLEY DUNGLISON.

*Girard Street,*

*Philadelphia, March 11, 1837.*

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# MEDICAL METHODOLOGY.

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## CHAPTER I.

### PRELIMINARY EDUCATION.

THE subject of practical education has occupied the attention of every enlightened nation, and has ever been one of intense interest to the reflecting portion of this country. It has been a universally received axiom, that the foundation of a republic must be in the information of its people, and that, whilst the monarchical governments of other countries may be successfully administered by an oligarchy of intelligence, a government—like that of the United States—cannot be carried on without an extensive diffusion of knowledge amongst those who have to select its very machinery. The political circumstances of a country will, also, modify, most importantly, the course of instruction; and that system, which is adopted in the old universities of Oxford, Cambridge, and Dublin, in a nation in which the law of primogeniture exists, where wealth is entailed in families, and where the colleges themselves are richly endowed, may be impracticable, or impolitic, in a country not possessing such incentives. Education must, therefore, be suited to the country, and a long period must elapse before we can expect to have individuals

as deeply instructed as in those universities, although the mass of the community may be more enlightened. We have no benefices, no fellowships with fixed stipends, to offer those who may devote themselves to the profound study of certain subjects. In England and Ireland, it is by no means uncommon for a student to remain at college until he is twenty-two or twenty-three years of age, in the acquisition of his preliminary education, or of those branches that are made to precede a course of professional study—the whole period of his academic residence being consumed in the study of these branches; but, in this country, such a course would be as unadvisable as it is generally impracticable. The equal division of property precludes any extensive accumulation of wealth in families: the youth are compelled to launch early into life: the more useful subjects of study have to be selected, and the remainder are postponed as luxuries, to be acquired, should circumstances admit of indulgence.

In no country are the colleges or higher schools so numerous, in proportion to the population, as in the United States. There are not fewer, perhaps, than eighty-five schools capable of conferring degrees; yet, an erroneous inference would be drawn, were we to affirm, that the education of a nation is always in a direct ratio with the number of its higher schools. Such would be the fact did these institutions assume an elevated standard in the distribution of their highest honours, and were the condition of the intermediate schools such, that the youth could be sent to the university so prepared as to be able to cultivate his studies there to the greatest advantage. Unfortunately, in many parts of the United States, the condition of

the intermediate schools and academies has been grievously neglected; so that the authorities of the universities have been compelled to lower their standard, and to admit students totally unprepared for more advanced studies. In this way, many of the higher schools have degenerated into mere gymnasia, or ordinary academies. This circumstance, with the multiplication of institutions capable of conferring degrees, has been attended with the additional evil, that, in some, the highest honours have been, and are, awarded for acquirements, which would scarcely enable their possessors to enter the lowest classes in others.

Every well-devised system of general education should combine an attention to language,—to the sciences that relate to magnitude and numbers,—and to those that embrace the phenomena of mind and of matter.

Little doubt can exist in the minds of the intelligent, that the ancient languages should form one element. Much has been said—and will continue to be said—on both sides of this question, into which we do not propose to enter. Admitting, however, that the Latin language, for example, is less necessary now, than when it was the exclusive language of the learned, and that the modern languages have emerged from their then *Patois* condition, and risen in relative importance, a certain knowledge of that tongue, as well as of the Greek, ought still to form part of the education of every gentleman. The minds of youth cannot be better engaged, during the early period of their university career, than in becoming acquainted with the classic models of antiquity, and practised in the habits of dis-

crimination, which the study engenders. Whether it should be prosecuted to the extent inculcated at the English universities, and to the comparative exclusion of other subjects, is another question. In this country, at least, the course would be injudicious, and unfeasible. In the very earliest copy of the enactments of the University of Virginia, it was determined, by its illustrious founder, and his able associates, that no diploma should be given, in any of the schools of the university, to any one, who had not passed such an examination in the Latin language, as had proved him able to read the highest classics in that language, with ease, thorough understanding, and just quantity. "And if he be also a proficient in Greek," adds the enactment, "let that too be stated in the diploma; the intention being, that the reputation of the university shall not be committed but to those, who, to an eminence in some one or more of the sciences taught in it, add a proficiency in those languages, which constitute the basis of a good education, and are indispensable to fill up the character of a 'well educated man.'"

Without dwelling on the unreasonableness of denying a diploma to one who has a sufficient knowledge of mathematics, or chemistry, or of natural or moral philosophy, because he may not be thoroughly acquainted with Latin, it is surprising that the regulation should not have struck that learned and philosophic individual, as constituting a total prohibition to graduation in certain departments. To be able "to read the highest classics in the Latin language with ease, thorough understanding, and just quantity," would, of itself, require as much time as the majority of American youths are capable of devoting to their collegiate



instruction. Accordingly, the Faculty of Professors, early and judiciously suggested a modification of the rule relating to graduation, which was at once adopted by the Board of Visitors. As it now stands, it merely requires, that every candidate for graduation in any of the schools, shall give the Faculty satisfactory proof of his ability to write the English language correctly.

The ancient languages should certainly form one element of general education, and this, we believe, is conceded in most, if not in all the universities of this country, as regards the attainment of a university degree. As little doubt can there be with regard to mathematics, which has, in some institutions, been esteemed the study of primary importance. The utility of a certain acquaintance with numbers, and magnitude, is obvious in every department of life; but the greatest advantage from the study is the precision and accuracy, which it gives to the reasoning powers.

When the student has attained this more elementary instruction, he is capable of undertaking satisfactorily the study of physics, and of becoming acquainted with the bodies that surround him, and the laws that govern them, as well as of entering upon the science of moral philosophy, and of comprehending the interesting subject of his own psychology.

These would seem to be the only departments of knowledge, that need be required for the attainment of a university degree. They comprise an acquaintance with the ancient classics, and the philosophy of language, as well as with mathematical, physical, and metaphysical facts and reasonings; and their acquisition enables the student to enter upon professional or political life with every advantage. Nothing, it will

he observed, has been said of the modern languages. The valuable stores to be deduced from these, especially from the French and German, are of themselves attractions, which render collegiate compulsion or recommendation unnecessary. No one can now be esteemed well educated, who is thoroughly ignorant of them.

Thus far we have spoken of the requisites for a collegiate degree of graduate in the arts. It would be well, were every one—who is destined for a professional or other calling—capable of spending so much time at college as to pass through this prescribed course. But it unfortunately, too often, happens, that the means or the inclinations of the student, or of his parent or guardian, do not permit this. Still, although he may be denied the acquisition of honors, his studies ought to be made to embrace those departments of knowledge, which are required for a degree; and he, who is unable to avail himself of collegiate instruction, should endeavour, as far as practicable, when his opportunities will permit, to improve himself in those departments.

When the Faculty of the University of Virginia recommended, that no student should be permitted to graduate in any school of that Institution, unless he could give them satisfactory proofs of his ability to write the English language correctly, the recommendation might seem to have been a work of supererogation, inasmuch as it might be presumed, that every one, before entering a higher school, had attended sufficiently to this matter. It is but too true, however, that the student is received into many of the colleges, after he

has been employed in scraping together a few Greek and Latin words and phrases, although he may be lamentably ignorant of the literature, structure, and even of the commonest principles of the orthography of his own tongue. The organization of our colleges is defective in not having a department of English language, in which the studies of Rhetoric, and the English classics, may be pursued practically. A chair, embracing these objects, should be established in all the higher schools, and a certain degree of proficiency, in the subjects taught in it, should be preliminary to every collegiate attainment. It would be an instructive and delightful study to trace back, as far as possible, the language of Britain to its aboriginal condition, and to follow up the changes impressed upon it, by the Keltic, Gothic, Roman, Saxon, Belgic, Danish and Norman invaders; the investigation being accompanied by elucidative references to the literature of the different periods. The poetry, romances, and the drama would constitute inquiries of abundant interest and information. To these might be added didactic and rhetorical exercises for improving the student in the practice of writing, not merely accurately, but readily, elegantly, and perspicuously. Such a professorship was wisely established in the University of London; but the example has not been followed by many—if by any—of the higher schools on this side of the Atlantic. Yet it is lamentable to observe the ignorance of the vernacular, frequently displayed in the inaugural theses of candidates for distinction, not only in our literary, but in our professional schools. The composition is often not only objectionable in point of style; but its orthographical inaccuracies are discreditable to the industry and



observation of the author; and it might be fairly inferred, that if he be faulty in these respects, the defect may extend to subjects of yet greater moment.\*

The education of the youth, who is intended for the medical profession, should be essentially that adapted for the well educated gentleman. There is no avocation that requires such fertility of resources; none that more demands all those facilities, which an acquaintance with the various kinds of reasoning above mentioned bestows. The study of medicine is essentially physico-moral. It demands, consequently, both physical and metaphysical reasoning: yet how few are there, who enter upon the study, whose minds have been properly tutored for its investigation. It is a prevalent belief, and as erroneous as it is prevalent, that a less degree of talent is required for a physician than for a lawyer; and, strange enough! we sometimes hear a parent speak of placing a son—of the strength of whose intellectual powers he has some doubt—to the study of medicine, because he is apprehensive that his talents might not enable him to succeed in the profession of the law. Occasionally, too, we hear the remark, that a certain individual ‘has a natural turn for physic;’ is ‘born, as it were, a physician.’ The profession of the law doubtless requires some capabilities, which that of medicine does not, to the same extent at least; but no department of science or of art demands greater judgment, a higher reach of intellectual qualifications, or a deeper preparation, by physical and moral culture,

\* On the subject of college education and discipline, see an article, by the author, in the *American Quarterly Review*, Vol. ix. p. 283.

than medicine; and this has been the opinion of some of the brightest ornaments of science and literature. Some persons may take greater delight than others in the study. Some may attain a knowledge of its facts and principles with greater facility than others; but it need hardly be said, that he, who has not a mind adapted for reasoning, and for judging, on other difficult topics of physical and moral inquiry, cannot possess these powers in reference to the intricate machinery and actions of the human frame, in health and disease; and it may be laid down as incontrovertible, that he whose intellectual manifestations are generally feeble, cannot carry with him the necessary qualifications to the bed of sickness.

By the common consent of cultivated nations, the Greek has been selected as the language for the formation of the different compound terms employed in science; and hence—if on no other account—the utility of the medical student's being acquainted, to a certain extent, with that language. Independently of the advantage, which it gives him, of being able to peruse the works of the fathers of physic, in the language which they spake and wrote, it enables him to comprehend the various terms of science, and to store them in his mind with much greater ease, than when the medical vocabulary is placed before him without such a valuable aid to memory. In this respect, however, it affords him facilities only. A want of acquaintance with the Greek shuts off altogether the perusal of the writers in that language from the pupil of science, but it does not altogether preclude—although it may impede—the acquisition of medical technology, any more than a want

of acquaintance with the Anglo-Saxon precludes the attainment of a knowledge of English.

A certain knowledge of the sister language of antiquity, the Latin, is yet more necessary than of the Greek. In this country, and in Great Britain, especially in the latter, the custom is to write the prescriptions in that tongue; but some of the continental nations of Europe have discarded it, and now employ, exclusively, their vernacular. A good deal, as shall be shown hereafter, may be said in favour of adhering to the ancient practice. At present, it is enough to say, that no young man is fit to enter the office of either the physician or the surgeon, unless he is so far acquainted with the Latin language as to be able to comprehend, after a little instruction, the various directions that may be given for the preparation of extemporaneous and officinal formulæ. Serious accidents have arisen from ignorance on this point. Sixteen years ago, an action of slander arose between two medical practitioners—the plaintiff an apothecary, and the defendant a physician—which proceeded from the latter having prescribed some laxative medicine for a nervous and costive old lady. The prescription, after directing the constituents of the medicine, added, “*Repetatur si opus sit.*” The apothecary being absent, and his apprentice just from school, instead of construing the prescription properly, “to be repeated if occasion should require,” or, “if it should be necessary;” or, in other words, “if the first dose should not operate,” wrote on the label, “to be repeated *if it operates.*” The old lady, consequently, after having experienced the effect of the first dose, took another, and repeated it again and again, until she swooned from exhaustion.

In alarm, the physician was sent for, who incautiously exclaimed, and afterwards repeated to others, "Coleman has killed my patient!" For this, the action was brought, and forty shillings damages, and about two hundred pounds costs, were awarded to the plaintiff.\*

In another case, a medicine was directed by the physician to be given to a newly delivered female, and to be repeated, "*pro re nata*," or, "as occasion may arise." This is said to have been translated by an ignorant compounder—"for the little thing just born," which thus became the receiver of that which was intended for the parent.†

The diplomas, and even the examinations, are yet couched, in some countries, in Latin, although many innovations have been effected in this respect. As regards the diploma, the University of Virginia has commenced the innovation of writing it in English, so that it may be intelligible to every one. It has been argued, in favour of these documents being in Latin, that it is a universal language with the learned, and therefore, that a diploma in this language will be understood every where: but this is not an argument of much practical weight. How rarely can it happen, that this will apply to a graduate of any of the universities of the United States: on the other hand, the practice, at present pursued in most of our colleges, might lead to much imposture. How easy, for instance, for one who has a master's degree, or who has the diploma of membership in a medical society, to

\* Chitty's Medical Jurisprudence, American edition, p. 11. Note.

† "*Tirocinium medicum*," &c. &c., by Wm. Chamberlaine, member of the Royal College of Surgeons, &c. London, 1812. p. 76.



palm it upon the uninstructed for a doctor's; whilst, if the diploma were written plainly and concisely in English, no fraud could succeed. Besides, there is, too often, a style of composition any thing but Ciceronian.

The object of a medical diploma is to satisfy the community, amongst whom a physician may settle, that he has gone through a prescribed course of study, and has proved himself capable of practising his profession. It is, in many places, a permission to practise; although, in some of the states of the union, a farther diploma is necessary before he is regularly licensed to pursue his avocation. Such is the case, also, in London, and within seven miles of it. Every graduate of every university—with the exception of Oxford, Cambridge, and Trinity College, Dublin—is compelled to subject himself to an examination before the Fellows of the Royal College of Physicians of London, in order to be permitted to practise within the limits mentioned. In the state of Maryland, the graduates of the University of Maryland are allowed to practise without undergoing any examination; but this, we believe, is a privilege to the state university only. No graduate of any other college of the union, or of any other country, can exercise his calling, without becoming one of the '*permissi*.' A similar law exists in Massachusetts. No one, who is not a doctor in medicine of Harvard University, is a licensed practitioner in that State, until he has passed an examination before the Massachusetts Medical Society.

The form of the Maryland license is as follows:—

**Facultas Medica et Chirurgica Marylandiae,**

ANNO DOMINI MDCCXCIX, CONSTITUTA,

OMNIBUS AD QUOS PRÆSENTES LITERÆ PERVENERINT,

**Salutem.**

Quum in chartâ nostrâ nobis concessum et confirmatum fuit, ut eos qui se literis bonis et artium liberalium studiis præcipuè ornaverint, nostra **Facultatis** gradibus decoremus et quum in ejus modi honorem tales imprimis viros evehi volumus, qui nobis cæterisque literarum studiosis, exempla præclara præbeant. Quumque ornatissimum virum — nobis amplissima peritiæ, doctrinæ et virtutis documenta peradmodum commendarunt. Idcirco, supra dictæ **Facultatis** auctoritate, conspirantibus suffragiis, eundem hujusce **Facultatis** **Socium** creavimus et constituimus, eumque virtute præsentis Diplomatis, singulis juribus, privilegiis, et honoribus, huic ordini quæque pertinentibus, frui et gaudere jussimus.

Et cujus rei testimonium sigillum Facultatis præsentibus apponimus nostraque nomina infra scripsimus.

Datum Baltimorii, die mensis ———, Anno Mundi salutis———,

————— } PERQUISITORES.

————— *Præses.*  
 ————— *Scriba.*

The necessity for a local document, like the above, being in Latin cannot well be urged on any ground except custom. It entitles the individual to practise in the State of Maryland, and in that State only; and, therefore, on every ground, the vernacular ought to have been chosen. The document is liable, too, to the objection that may be urged against almost every thing of the kind, of unnecessary verbiage, leading to manifest injustice. If intended for those only "*qui se literis bonis et artium liberalium studiis præcipuè ornaverint*,"—for the "*ornatissimi viri*" alone,—the expressions must necessarily be incorrect as to some who have obtained it. In this respect, then, if in no other, the conception of the document is faulty.

Similar objections are applicable to the generality of Diplomas issued from our medical and other colleges. The following is one of the most respectable of them.

## ACADEMIA ———

OMNIBUS AD QUOS HÆ LITERÆ PERVENERINT,

## Salutem.

**Quum** vir ornatus et summis animi dotibus instructus ——— postquam pleno gradu arti mediæ studuisset, nos honores academicos poposcerit, sequē periculum sui facere in rebus mediæ paratum ostenderit; per universam eum medicinam examinavimus.

**In quo** periculo eum scientiarum ac medendi artis se abunde peritum probaverit, nos dictum ——— Medicinæ Doctorem creandum et declarandum censuimus, eumque Medicinæ Doctorem creavimus et declaravimus, et his literis **Doctorem** constituimus, atque apud omnes haberi et appellari volumus.

**Etque** facultatem plenissimam damus de re medica docendī et consultandi, et denique tam medicinæ theoreticæ quam præticiæ munera ubicunque terrarum exerceendi, et omnes simul honores et jura, et privilegia ei concedimus quæ Medicinæ **Doctori** usquam gentium concedentur.

**In quorum** fidem literis hisee sigillo **Academici** communi munitis nomina nostra subscripsimus.

**Datum Urbe** ———, mensis ———, Anno Domini, ———.

Signed by the trustees and the professors of the medical Department of the University.

All these diplomas are in the complimentary diction observed by the older Institutions of Europe, a diction which no one would think of employing, were he compelled to furnish a document of the kind in English. Besides, what is the value of the '*vir ornatus et summis animi dotibus instructus*,' when applied to every one, who gains his degree; some of whom, it is well known,



in spite of every endeavour of the examiners to execute their duty faithfully, will occasionally pass, without being by any means '*abunde periti*' in their profession. Were the candidate for graduation compelled to write his own diploma in good Latin, and were it known, that he did so write it, there might be this plea for adhering to ancient usages—that it would encourage the medical student to pay proper attention to his preliminary classical education; but this, as is well known, is not the case; and it is equally well known, that many a young man receives his degree, who is incapable of translating his diploma into English.

Such being the fact, no matter what may be the fancy, we think it more judicious, that the diploma should be written in English. Already it is so, as has been said, in one University of this country; and the same course has been pursued by the Royal College of Surgeons, and by the Society of Apothecaries, of England; the apothecary, there, being a kind of sub-physician, required to attend regular courses of prescribed lectures, and to subject himself to an examination for licence, before he can practise his profession in any part of England or Wales. He is the regular family attendant, the physician being called upon mainly in cases of consultation. The apothecary, too, prepares his own prescriptions as well as those of the physician,—in short, practises upon the plan pursued by all our country physicians, and by many of those in the towns.

The diplomas of those corporations are simple, but sufficient. They have the merit, too, of being written in good English, and of being intelligible to all. The following is that of the Royal College of Surgeons.

*Know all men by these presents*, that We, the Court of Examiners of the Royal College of Surgeons in London, have deliberately examined Mr. — —, and have found him to be fit and capable to exercise the Art and Science of Surgery.

We, therefore, admit him a member of the college, and authorize him to practise the said art and science accordingly.

In witness whereof, we have subscribed our names; and have caused the common Seal of the College to be fixed thereunto.

Dated the ——— day of ———, in the year of our Lord ———.

Signed by the Masters, Governors, &c.

The diploma of the Apothecaries' Society, of London, is equally simple.

**We, the Court of Examiners**, chosen by the Master, Wardens, and Assistants of the Society of the Art and Mystery of Apothecaries, of the City of London, in pursuance of a certain act of Parliament, passed in the 55th year of the reign of his Majesty King George the Third, entitled an act for better regulating the practice of apothecaries throughout England and Wales, do hereby, by virtue of the power, and authority in us vested by the said act, certify, that — — — has been by us carefully and deliberately examined as to his skill and abilities in the science and practice of medicine, and as to his fitness and qualification to practise as an apothecary, and we do hereby, for and on behalf of the Master, Wardens, and Society, farther certify that the said — — — is duly qualified to practise as an apothecary.

Dated the ——— day of ———. Apothecaries' Hall, London.

Signed by the Board of Examiners.

These testimonials are altogether to the point. They depose only as to the evidence of knowledge exhibited by the candidate for graduation, on his examination. They say nothing as to the other intellectual and the moral qualifications of the individual, of which the board of examiners can rarely know any thing. We have before us the diploma of the "*Medical Society of London*," the oldest of that metropolis,

and, for that reason perhaps, written in Latin; and if we are to credit its assertions, the members of the society must be most distinguished, for their qualities of head and heart,—every one of the “*Socii*,” being admitted “*cum propter magna in artem Apollineam merita, tum propter summam humanitatem suavissimosque mores.*” The value of the testimonial is, however, greatly diminished by the fact, that these words are the standing portion of the document, and that when a new member is elected, on the proposition of some one or two of the body, his name is inserted in the blank, whatever may be his mental or moral manifestations. On the ground, then, of honesty, the testimonial is defective, and, were the sentence in English, the objection would be so glaring, that its retention would probably be vindicated by no one. Yet, being written in Latin, it is tolerated; and the toleration affords some ground for the remark cited by Chitty, “that perhaps a mouthful of nonsense sounds better in Latin, or other dead language, than in English.”\*

How much preferable is the simple *Diplôme* of the sister society of Paris—written in the vernacular of the country.

*Société de Médecine de Paris, instituée le 22 Mars, 1796.*

#### DIPLOME.

La Société de Médecine de Paris, procédant aux termes de ses réglemens, a dans sa Séance du ———, mil huit cent ———, nommé ——— (Membre) M. ———.

A Paris, le ———

Signed by the Members composing the *Bureau de la Société*, and its commission of administration.

\*Op. citat. p. 11.

In the establishment of the University of Virginia, the venerable customs that had prevailed for ages were retained only when esteemed worthy of retention. Precedent was wholly disregarded. Its diploma is even more simple than any we have cited, yet, it is sufficient for all purposes; and the mere expression, that an individual has attained the highest honours, is properly regarded as ample evidence to the community, that he possesses the requisite qualifications for practising his profession, and that he is entitled to all the rights and privileges of the doctorate. The diploma is in English, and as follows.

### University of Virginia.

Mr. \_\_\_\_\_ has this day been declared a graduate in the School of Medicine of this **University**, with the title of Doctor of Medicine.

\_\_\_\_\_ *Chairman of the Faculty.*

\_\_\_\_\_ *Professors.*

\_\_\_\_\_ *Secretary of the Faculty.*

A feeling of anxiety to encourage the study of the Latin language has induced the authorities of some colleges to offer a reward for the best *Latin* dissertation, presented by the candidates for graduation. Formerly, it was the custom, in every university, to have all the inaugural dissertations written in that language; but, in many—in this country, universally—the plan has been abandoned, and wisely, we think, inasmuch as the authorities have no evidence whatever, that it has been ‘done’ into Latin by the candidate himself. The converse, indeed, is often notoriously the fact; and it has happened to the author, officially, to have a candidate withdraw his dissertation, from



compunctions of conscience, and admit, at the same time, that it was not his own composition.

A much better course, for testing the classical attainments of the candidate for honours, is that followed in many medical institutions—of requiring him to translate passages from some author, as from Celsus, or the *Pharmacopœias*; or of conducting the examination altogether, or in part, in Latin; yet, there are objections to the last method, inasmuch as it is difficult to vary the questions sufficiently, and to go into as full an examination as may be necessary to test the medical qualifications. The plan may enable the examiners to judge of the student's acquaintance with the Latin language, but much farther it cannot go. Impressed with such views, the practice of examining in the dead languages, for graduation, has been abandoned in the University of Edinburgh, and we believe in the Scottish universities generally. It is doubtful, however, whether the total abandonment of every form of classical examination may not have had a similar effect to that which was ascribed by Lord Ellenborough to the statute requiring pleadings, proceedings, and records to be in English—that it has rendered attorneys and their clerks still more ignorant of the Latin language, and has caused the literature of the inferior part of the profession of the law to retrograde.

We have said, that in this country, and in Great Britain—especially in the latter—it is the custom to write the prescriptions in Latin. Attempts have been made to abolish this practice; but, although they have not succeeded in the United States, the majority of physicians are in the habit of writing every other part of the prescription, except the names of the



remedies, in English. A cause, assigned for this, is, that the apothecaries and their assistants are usually so badly educated, that if the directions were given in Latin, they would be unable to translate them; but this is a very insufficient reason, inasmuch as if all prescriptions were in that tongue, the education of the apothecary would be made to respond, and there can be little doubt, that the effect of the present practice, on the apothecary at least, has been similar to that described by Lord Ellenborough as resulting to the profession of the law from the change of practice above referred to.

The only objection, of any weight, that has been urged against writing the prescriptions in English, is, that the patient might be able to detect whatever the physician is prescribing, and that therefore in many cases, the latter might be precluded from using remedies, which he considered highly appropriate, but against which the former might have taken up some groundless prepossession; or that, in other cases, where the practitioner had wished to pursue an 'expectant' plan, his object might be defeated by the discovery, and conviction, on the part of the patient, of the inertness of the prescribed agents.

It has been farther urged, that the patients and their attendants might thus ascertain the dangerous tendency of a disorder, and, becoming alarmed, recovery might be impeded or prevented. There is not much force, however, in these objections. Almost all the potent articles of the *materia medica*,—indeed almost all the articles,—have a technical name, which so strikingly resembles the English, that there can be but little difficulty in discovering the medicine which the patient is taking. Mercury is perhaps the therapeutical agent,

that most frequently suggests concealment, and where such concealment is required, the technical name, at present generally received—'*Hydrargyrum*'—is certainly preferable to the English appellation,—but even this term is of modern introduction: the Latin term, *Mercurius*, having formerly been universally employed. Moreover, the advantage of the present term is rather in its being *technical* than *Latin*.

As to the objection against the use of English—that patients and their attendants, by the exact knowledge of the components of a medicine, which, they had perceived, had succeeded in one or more instances, would be apt, without due regard to the variations in disorders, and in constitutions, and other varying circumstances, to administer the same medicine on other occasions, when wholly inapplicable, and thereby produce the most baneful effects—it is hardly worthy of notice. It applies, indeed, to every extemporaneous formula, written in Latin or not. For, if such a formula were to succeed in any case, the patient or his attendants might have the prescription made up at the apothecary's, and applied to the supposed case, with every evil consequence that has been suggested. Besides, it is very easy for a patient to have a Latin prescription rendered into English, and thus to obtain all the information he may desire.

Perhaps, after all, one great cause of the continuance of the present mode of writing prescriptions is, that veneration for antiquity, which vindicates the Latin as the language for diplomas. The whole form of the prescription is, indeed, a memento of bygone periods, when Jove was invoked for his blessing on the medicine, and when symbols—unknown except to the initiated—were always employed. Medicine was then

an 'art or mystery;' and the prescription of the physician, equally with the labels on the bottles and boxes of the apothecary, conveyed the idea of that mystery, which has been properly designated as imperfect knowledge; but now, that this has been discarded,—that the arcana of the science are thrown freely open, and that the darkness and complicated dogmas of the schools have yielded to a better mode of reasoning and experiment, so that what was formerly taught and implicitly credited, as a dictum of the master, is now exhibited perspicuously and demonstratively, and, unless rendered intrinsically clear and intelligible, is unhesitatingly rejected,—these relics of a barbarous period ought to be discarded. If, however, the custom be retained, it is of some moment, that the prescriptions should be creditably written. Too often, we find a jumble of English and Latin, disgraceful to the merest tyro. Occasionally, indeed, in works, which, as regards their practical precepts, are looked upon as authorities, we observe faults in the formulæ, that could scarcely be expected from a boy on the fourth form of an ordinary preparatory school. In proof of this, the following prescription is taken from the work of a most respectable practitioner and professional writer. It is a form for the tartar emetic ointment, much used for exciting pustulation on the skin, in various internal diseases, and it is cited from the *second* edition.

<p>“ R.—<i>Tartrite of Antimon.</i> ʒiss.  <i>Ol. lavend.*</i> vel <i>ess. lem.†</i>  <i>gtt.</i> xx.  <i>Cerate simp.</i> ʒj.  M.</p>	<p>Take Tartar emetic 1½ drachm.  Oil of Lavender or  Essence of <i>bergamot</i>,† 20 drops.  Simple cerate 1 ounce.  Mix.”</p>
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\* Lavand. † Lim.

† Lemon.

In the same volume is a 'recipe' for 'Dover's powder.'

"R.—Pulv. ipecac. pulv. opii. āā. ʒj.  
Sulphate of potass. ʒviij. M."

And a formula for 'nitrous powders.'

"R.—Nitrate of potass, ʒiss.	Take Nitre, $1\frac{1}{2}$ drachm.
Turtrite of antimony, gr. i.	Tartar emetic, 1 grain.
Calom. ppt. gr. iv.	Calomel, 4 grains.
M. div. in viij.	Mix and divide in 8 parts."

The Latin of the formulæ, where it is attempted throughout, is equally objectionable. We take two specimens from the same page.

R.—Hydrargyr. præcip. alb. ʒij.  
Ess. lemon.\* gut. xl.  
Adeps† præparat. ʒij. M.

and

R.—Flor. Sulph. ʒij.  
Pulv. muriat. ammon. ʒij.  
Ol. menthæ ʒi.  
Adeps‡ præparat. ʒiv. M.

The confusion of tongues, in some of the above, will be made more manifest by writing out the prescriptions at length. That for the 'nitrous powders' affords a good example.

Recipe.—Nitrate of potass, sesquidrachmam.  
Turtrite of antimony, granum.  
Calomelanos præparati, granâ quatuor.  
Misce. Divide in octo (partes.)

\* Limon. † Adipis. ‡ Do.



The wit and sarcasm of Molière were properly directed against the physicians of his day, but we doubt, whether he could have found better subjects for his castigation, than the specimens of medical Latin, which we daily meet with. The classic address of the President of the Faculty, when he confers the doctor's degree on Argan, is scarcely inferior to them.

“ Ergo cum isto boneto  
 Venerabili et docto,  
 Dono tibi et concedo  
 Virtutem et puissanciam  
 Medicandi,  
 Purgandi,  
 Seignandi,  
 Perçandi,  
 Taillandi,  
 Coupandi,  
 Et occidendi,  
 Impune per totam terram.”\*

Admitting, then, that it would be most important for every one, who enters upon the study of medicine, as well as upon the other learned professions, to be able to peruse the writings of the sages of antiquity in the languages in which they wrote, it must be equally admitted, that where an individual has unusual strength of mind and application he may be enabled, after he has commenced his professional studies, and even after he has entered upon the active duties of his profession, to acquire a considerable knowledge of the ancient languages, and even to become distinguished for his learning; whilst, again, we have many

\* ‘*Le Malade Imaginaire*,’ Intermède iii.



signal examples, which show, that professional distinction may be attained, where the classical attainments have been feeble, or where—if the preliminary classical education has been respectable—its fruits have not been available on occasions where they were needed. In elucidation of these positions, reference might be made to many individuals now living, who are highly distinguished as divines, lawyers, and physicians, but this would be invidious. The lives of the dead—the illustrious dead—are matters of record: from an attention to them we may often discover the grounds for their distinction, and a careful investigation may depict to us defects, which prevented them from attaining a still more commanding elevation.

There is not a Tyro in the profession, who has not heard of the name and abilities of the late Dr. Armstrong, who raised himself to eminence in his profession, in London, by his talents alone. Previous to his removal to the British Metropolis from the North of England, he had published his valuable works on Typhus and Puerperal Fever, and so distinguished had they made him, that when the lady of the author's friend, Mr. C. T. Haden,—himself a man of literary and professional merit,—was attacked with the latter complaint, Mr. Haden—impressed with the fatality of the disease, as then ordinarily treated, and having heard, that Dr. Armstrong was in town—went from house to house, where he was likely to obtain information concerning the doctor's lodgings, and, for a long time, without effect. Accidentally, he fell in with an individual, who directed him to where Doctor Armstrong resided; and to the judicious practice he pursued, Mr.

Haden always ascribed the recovery of the partner of his bosom.

This was almost the first case, which Dr. Armstrong attended, after his removal to London, and it was the nucleus of an extensive and lucrative practice. To Mr. Haden, he was previously entirely unknown, except by his works, proverbially the best demonstrations of the man. Yet this distinguished individual—distinguished in the annals of professional science—was rejected, when examined before the Royal College of Physicians of London, on account of his deficiency in the Latin language, although he had many years previously passed his examinations for a medical degree, in the University of Edinburgh, where the classical requisitions were considered to be even higher than in the London College. “In the spring or summer of 1818,” says his biographer—Dr. Frank Boott\*—a native of this country, “Dr. Armstrong presented himself for examination at the London College of Physicians, conformably to its regulations, which require, that the graduate in medicine of any other University than Oxford or Cambridge should pass the ordeal of its favor, and obtain its licence, before entering upon practice in London, or within a given distance of the metropolis. He had perhaps undervalued the estimate, which the Board of Examiners place on classical diction, and the alphabet of the profession; for this distinguished physician, who had received a diploma from the most efficient and most celebrated school of medicine in Great Britain, who had been in successful

\* ‘Memoir of the Life and Medical Opinions of John Armstrong, M. D.’ Lond. 1833. p. 30.

practice eleven years, and was the author of three of the most popular works, which the medical press of this country, (England), had ever put forth, the fame of which was still sounding in the periodical journals of the day, was rejected as incompetent to continue in the practice of his profession in London, and as undeserving the honor of having his name enrolled among the members of the college."

It was well known, that Dr. Armstrong was not rejected for any want of professional attainments: the assumption of this ground would have been untenable. The regulations of the college required, and still require, that the candidate shall be acquainted—to a certain, but to no great, extent—with the Latin language, and in this Dr. Armstrong was found deficient. The rejection, however, created a reaction in his favour. It was regarded as an act of persecution, and was, thus, one of the elements of his future success; for, a vacancy having occurred in the London Fever Hospital, the rules of which excluded any one, who was not a fellow or licentiate of the college,—in order to obtain the desirable services of one, who had written so ably on Fever, and to show, that their conviction of Dr. Armstrong's professional qualifications was ample, the governors of the institution rescinded the regulation, and appointed him physician to that important charity.

The true cause of Dr. Armstrong's rejection was, doubtless, his neglect of his previous classical attainments, whilst engaged in the active duties of his profession, and his confidence, that the London College would not reject him on a topic, which, in no way, involved his qualifications as a practitioner. He was, however, mistaken. Yet to a mind, sensitive like that

of Armstrong, how galling must this rejection have been, especially as he was compelled to present himself, again, before the same tribunal, before he could enjoy the full privileges and immunities of his calling. This he did in the following year, when he was admitted one of the '*Permissi*' or what are called 'Members' of the College of Physicians.

But, although Armstrong had neglected his classical learning, he was, from the commencement of his professional career, a severe student. No one felt more than he,—to employ the language of a recent writer on Medical Education,\*—that the moment a practitioner ceases to be a student, he is no longer worthy of the confidence of the public, and that the life of a physician can only be truly useful and honorable, when it is unremittingly employed in study, in determining the truth of theoretical opinions by observation, and improving the value of practical suggestions by the test of experience. It was in this way, that Armstrong was,—as every distinguished man of science must be,—*self-made*. Whatever may be the amount of abilities, they cannot be developed without a certain degree of application, and although this amount may vary according to the precise capability, no marked developement can occur, in any case, without study. It is impossible to adduce the name of a single scientific physician, which has survived his existence, who was not through life a student. Collegiate honors, as has been properly observed by Montaigne, may form the pedestal: it is the man that forms

\* '*Thoughts on Medical Education*, addressed to the Council of the University of London,' by Dr. A. T. Thomson.



the statue,—an idea, which has been repeated, in a modified manner, by the Scottish poet,—

“The rank is but the guinea stamp,  
The man’s the gowd for a’ that.”

Academic instruction and University degrees may place the candidate for professional eminence in the best road for the attainment of distinction, but, unless he continues to toil, he can never reach what ought to be the height of his ambition. It is to the scientific laborer in the closet, as well as at the bedside, that medicine is mainly indebted for its improvement; for, however valuable may be the services of the professional adviser to those, who may fall under his charge,—and whatever may be his titles to the love and admiration of the profession and the public, for his enlightened and honorable conduct in the exercise of his duties—unless he publishes the results of his observations and reflections, they necessarily die with him. It may be said, indeed,—and is often said,—that the physician, who is much engaged in practice, cannot find time for such publication; but this objection is more specious than valid, and it is too often suggested, where there is a deficiency in the requisite qualifications. Besides, an overwhelming practice is not acquired until after the lapse of a considerable period, during some portion of which the inclination and the power will be exhibited if they exist,—as the ground of excessive occupation cannot then be assumed. The truth, indeed, is that several of the most useful practical works we possess have emanated from persons enjoying an amount of practice not to be attained in situations



where the sphere is more restricted. Some of the most valuable of the productions of Sir Astley Cooper have made their appearance since he was fifty years of age, and when he was enjoying an extent of practice, which has never, perhaps, fallen to the lot of another individual. So long ago as the year 1819, the author was informed by a friend of Sir Astley, that his professional income was twenty-two thousand five hundred pounds sterling,—a larger amount than was probably ever acquired in the same time, by any member of the profession,—of the present, or of any bygone period.

Perhaps a more signal example of the results of genius aided by perseverance in the pursuit of knowledge, and in the absence of the advantages of education, could not be selected than that of John Hunter,—one of the most profound, original, and successful investigators into the mysteries of the animal economy that ever existed,—especially when the condition of medical science, at the time when he entered upon his useful career, is borne in mind. Hunter's education was extremely neglected. He was, in the first instance, apprenticed to a cabinet maker; but, hearing of the success of his elder brother—the celebrated Dr. William Hunter—in London, he offered his services to him as anatomical assistant, which were accepted, in the year 1748, when he was 20 years old. In this situation, he improved so rapidly, that in the following winter he was able to undertake the office of Demonstrator to the class. In 1755, he was admitted to a partnership in the lectures delivered by his brother; and, from this period, we may date the commencement

of those labors, which have stamped him as one of the greatest promoters of medical science that have ever lived. The Windmill street school—originally founded by the Hunters, and supported by the industry and talents of some of the best Anatomists and Physiologists of the British Metropolis—is a monument of their zeal for the advancement of a profession, of which they were such splendid ornaments.

From this humble commencement, aided, it is true, by his scarcely less distinguished brother, John Hunter rose to the highest scientific eminence. He was elected a Fellow of the Royal Societies of London and Göttingen, and of the Royal Society of Medicine, and Academy of Surgery of Paris: and died, in 1793, Inspector General of the Hospitals and Surgeon General to the Army,—leaving behind him a reputation unequalled by his predecessors, or by any of his countrymen, who have succeeded him in the career of scientific glory.

“Some when they die, die all: their mouldering clay  
Is but an emblem of their memories:  
The space quite closes up through which they pass’d.  
That HUNTER liv’d, he leaves a mark behind  
Shall pluck the shining age from vulgar time,  
And give it whole to late posterity.”

Independently of his various excellent works, with which every medical student must become more or less acquainted in the course of his professional education, some idea may be formed of the industry of the man, from the fact, that his museum—consisting chiefly of healthy and morbid preparations in human and comparative anatomy—was sold to the British Government for 15.000 pounds sterling, or nearly

70,000 dollars. It now forms the basis of the extensive Hunterian Museum of the Royal College of Surgeons of London.

To keep alive the proper remembrance of this great man, the Hunterian oration is annually delivered in the Hall of the Royal College of Surgeons, by one of the most distinguished Surgeons of the Metropolis.

The chief part of Mr. Hunter's labors appears to have been of a professional cast, and his knowledge was greatly confined to the efforts of his own countrymen. The deficiencies of his early education, and the time, which he devoted to his purely professional studies, prevented him from learning those languages, without some knowledge of which—at the present day at least—it is difficult to keep pace with the progress of medical science.

In the late Dr. John Mason Good, who died not longer ago than the year 1827, we have an illustrative instance of the practicability of acquiring high professional distinction, with the most exalted reputation for literary attainments, where the preliminary education must evidently have been limited,—from the fact, that, at the early age of fifteen, he quitted the house of his father, who had the pastoral charge of an Independent church and congregation, at Epping, in Essex,—and who, at the same time, superintended the education of a few young gentlemen,—to be apprenticed to a surgeon-apothecary. Prior to this, he had obtained some knowledge of the Latin, Greek, and French languages, but he had none of the advantages of collegiate instruction. So ardent, however, was he, in the pursuit of knowledge, and so desirous of acquiring it

through every available channel, that he applied himself—whilst acquiring a knowledge of his profession—not only to the study of different Teutonic, Romanic, and Slavonic languages, but also of many of the Oriental.

At the age of 26, he commenced the study of Hebrew, of which he soon acquired a clear, and critical knowledge: and seven years after this, he began his translation of Lucretius, for which he was, at one time, more celebrated than for any of his professional productions. This undertaking stimulated him to the study of various other languages,—in the first instance, to enable him to search successfully for parallel passages, but afterwards with much more enlarged views.\* In a letter to his friend, the late Dr. Nathan Drake—the well known and accomplished author of several literary productions of merit—dated in 1799, or when he was 25 years old, he says: “I have just begun the German language, having gone, with tolerable ease, through† the French, Italian, Spanish and Portuguese.” In a few months afterwards, he sent specimens of his translations,—especially of pieces of elegant poetry—to Dr. Drake, and other friends. In the following year, he informs Dr. Drake, that he had been sedulously studying the Arabic, and Persian; and, at no very remote period, the Russian, the Sanscrit, the Chinese, and other languages engaged his attention.

\* ‘Memoirs of the Life &c. of Dr. Good:’ by Olinthus Gregory, LL. D. Amer. Edit. p. 57.

† To ‘go through’ a language is a very common, although obviously inaccurate, mode of expression,—employed, in various parts of Great Britain, to signify, that the person has read the usual books employed in acquiring the language.



In the acquisition of these different languages, he did not follow the beaten and irrational track, of learning the grammar by rote, as it were, but adopted the more natural one, of gaining the vocabulary of the language first, as the child gains its mother tongue, and subsequently correcting the construction by a due attention to grammatical rules, many of which apply equally to all tongues. By such a method, he did not attain a critical knowledge of all, but he possessed such an acquaintance with them as was sufficient for useful purposes. "It gave him," says his biographer, Dr. Olinthus Gregory, "the capacity of detecting and relishing the beauties of the best authors, in those languages, which he was most anxious to explore; and it supplied him with views of the general analogies of language—as well as of the diversities and peculiarities, which prevented those general analogies from becoming universal,—more comprehensive, and more practical than any other person (except he were a linguist merely), whom I have had the happiness to know."

About this period, Mr. Good—who was at the time, and until the year 1820, when he was 56 years of age, a 'general practitioner,' (surgeon apothecary)—contributed largely to the Reviews and other periodical publications, of one of which, the 'Critical Review,' he was for some time editor, and the labor of preparing the most elaborate articles often devolved upon him. In the beginning of 1803, his occupations were astounding. He was finishing his translation of Solomon's 'Song of Songs' from the Hebrew; carrying on his life of Dr. Geddes, and walking from 12 to 13 miles a day, that he might see his numerous patients,—the amount of his professional income being, at this



time,—according to his own account,—upwards of £1400, or about 6,300 dollars, per annum. Nothing—it is obvious—but the greatest energy, and order, in the management of his multifarious occupations, could have enabled him to accomplish them; yet he effected all, and all satisfactorily.

These habits, and this activity of character, continued through life; and the author has been told by a clerical friend, who knew him well, that—like every one, who employs his time to advantage—he was never busy, but could always spare time from his various labors for social and domestic enjoyment. In this respect, he resembled one, whose productive powers surpassed those of any other individual of modern times, and on whose transcendent genius it would be idle to dwell. When Sir Walter Scott was asked by a literary friend, how many hours a day he could write for the press, with effect, he replied,—“I reckon five hours and a half a day as very good work for the mind, when it is engaged in original composition. I can very seldom reach six hours; and I suspect, that what is written after five or six hours’ hard mental labour is not worth much.” On being asked, how he divided those hours, he said.—“I try to get two or three of them before breakfast, and the remainder as soon after as may be, so as to leave the afternoon free to walk, or ride, or read, or be idle.”\*

That Dr. Good was a laborious student whilst he did study, until within a short period of his death, is sufficiently shown by his ‘Physiological System of

\* ‘Fragments of Voyages and Travels,’ 2d and 3d series, by Captain Basil Hall, Chap. 1.

Nosology,' published in 1820; his 'Study of Medicine,' which appeared in 1822, in four thick octavo volumes, and his 'Book of Nature,' published in 1826,—the year before his death:—all of which have been reprinted in this country, and are referred to, more or less, by every professional inquirer.

But it is not necessary to travel to other countries for examples of what unwearied industry, aided by ability, is capable of accomplishing, when we have so signal an example in a native of this country, and a graduate of the University of Maryland, of which he was one of the most distinguished alumni. I allude to the poor, once almost friendless, and subsequently afflicted, but admired, and now lamented, Godman, who, in spite of every disadvantage from fortune, and notwithstanding his brief career,—for he died at the early age of thirty-six,\*—and much of that career spent in sickness and suffering, succeeded in elevating himself to a high rank among physicians and naturalists. The period that has elapsed since he passed away from us is so brief, that the merited eulogies in the different periodicals are known to almost every one. His example, too, has already been selected by more than one teacher, as the loadstar for the guidance of the professional inquirer. From the loss of both his parents, Dr. Godman was early compelled to feel that his future success must depend altogether on his own talents and industry. At an early age, he was apprenticed to a

\* Most of the notices say thirty-two; but in a letter to his friend, preceptor and benefactor, Dr. Luckey, he asserts, that he had discovered his real age in an old book of his father's, and that he was twenty-one years old the 20th day of December, 1815.

respectable printer in Baltimore, but he soon quitted the occupation as not congenial to his taste, and entered, as a sailor, on board the Flotilla, which was then, in the fall of 1814, stationed in the Chesapeake. At the close of the war, when twenty-one years of age, he followed the bent of his inclinations, and immediately commenced the study of medicine,—first under the tuition of Dr. Luckey, of Elizabeth Town, Pennsylvania, and soon afterwards under that of Dr. Wright, of Baltimore—a gentleman of high professional merit. It is not necessary to dwell on the various details of his brief history ;—how he became successively Professor of Anatomy in the Medical College of Ohio, and subsequently in Rutgers' Medical College, established in the city of New York. The main incidents of his life are familiar to his professional countrymen, or, if not, can be readily learned by a reference to any of the memoirs that have been published.\* In those incidents, and in his various publications on medicine, and natural science, we have a signal illustration of what may be acquired, if it be sought after in the proper manner.

Like Dr. Good, Dr. Godman early directed his attention to the ancient and modern languages as the causeways of knowledge ; and notwithstanding the limited nature of his early education, he had acquired, we are informed, such a knowledge of the Latin, Greek, French, German, Danish, Spanish, and Italian languages, as to read and translate them with fluency, and to write some of them with elegance. “ Considering the decline of his health, for a long period,” says an eminent literary cul-

\* See, especially, the ‘ Memoir of Dr. Godman,’ by Dr. T. Sewall, of Washington City.

gist,\* “and the pressure of adverse circumstances, which he too frequently experienced, he performed prodigies as a student, an author, and a teacher ; he prosecuted extensive and diversified researches ; composed superior disquisitions and reviews, and large and valuable volumes ; and in the great number of topics, which he handled simultaneously or in immediate succession, he touched none without doing himself credit, and producing some new development of light, or happy forms of expression.” He lingered for years under pulmonary consumption ; understood fully the incurable nature of his melancholy condition ; spake and acted—we are told—with an unfeigned and beautiful resignation ; toiled at his desk to the last day of his existence, and still glowed with the love of science and the domestic affections.

Personally, the author had no acquaintance with Dr. Godman ; but, a few short months before his decease, he entered into a correspondence with him, regarding a new genus of fossil quadrupeds—the subject of Dr. Godman’s last communication to the “American Philosophical Society,” and contained in the third volume of the Society’s “Transactions.” In this publication, he courteously refers to the insignificant service, which the author was able to render him ; and, in the course of his correspondence, and not more than three months before his death, speaks of his intention to publish a work on “Myology,” and adds,—“If you have any observations of interesting anomalies or varieties in the muscular system, I shall be delighted to have an opportunity of adding a communication of them from

\* Robert Walsh, Esq.



your hand." Yet, in the very letter that contains this postscript, he says,—“ Since that time, (alluding to the visit of a mutual friend, Dr. R. M. Patterson, three weeks before) “until within two days since, I have been confined to bed, and unable to see any one but my physician. Indeed, I am very little better now.”—What a striking exemplification of the mind—beautifully depicted by Byron—“ which disease and poverty could not impair, and which death itself destroyed rather than subdued!”

In the contemplation of the termination of his sufferings, we find additional evidences, to those already possessed, of the inaccuracy of the deduction too often made,—that the pursuits of the investigator of the animal structure, and especially of that of man, are apt to lead to difficulties and doubts regarding his future destination. In some “ Lines, written under a feeling of the immediate approach of death,” he breathes out the results of his private meditations, and exhibits poetical powers, which, if cultivated, might possibly have gained him some distinction, in a department of the Imagination, not often associated, in the same individual, with the more sober efforts of the judgment required in the pursuits of science.

These are a few—a very few—examples, selected from a host of professional worthies, to exhibit what zeal and enthusiasm in the pursuit of knowledge are capable of effecting; and what honors and reputation may be acquired, by time well spent—not only whilst in the preparatory study of the profession, but during its active exercise; yet what an amount of subsequent labor would have been saved these distinguished men,



had their early education been more complete ! Although, therefore, their examples exhibit, that professional and literary eminence may be attained in spite of such disadvantages, they equally show the importance of early culture to prepare the way for more decided usefulness thereafter.

Of the modern languages, the French and the German should be studied by every one desirous of excelling in professional lore. The march of mind has been so steady and rapid in France and Germany, and so much attention has been paid there, in modern times, to the improvement of medical—and, indeed, of every kind of scientific—knowledge, that no one can well keep pace with the progression of science, unless he is able to peruse the works that are constantly emanating from the press in those countries. It is true, that many of the best productions are translated into our own tongue, and that the important contents of their scientific periodicals are transferred to the pages of our miscellanies, either directly, or through the medium of the journals of Great Britain;—still, much remains uncultured, and many of the most valuable works are of such a size, and character in other respects, as to preclude the publication of an English version. At the present day, there are few youths, who are not required to study the French language, and no one, perhaps, ought to enter within the pales of the Temple of *Æsculapius*, who is not more or less acquainted with it. There is certainly more reason to hold out inducements for the study of this language than of the Latin. There was a time—in the middle ages—when all knowledge was confined to the cloisters, and when it

was kept so, in order that the mass of the people might remain unenlightened, and power be restricted to the priesthood, by whom the medical art was wholly practised; and even after the revival of letters, the works of the learned were always written in Latin, in order to distinguish them from the “*profanum vulgus*.” But when the modern languages emerged from their Patois state, and attained the requisite cultivation, the ancient plan was abandoned, and at the present day, except in inaugural dissertations, in certain schools, such a thing as a Latin work on any department of science is rarely seen. The knowledge, consequently, of the Latin language, which was at one time *indispensable*, is now only *advisable*; but it has become almost indispensable, that the student should be acquainted with the chief languages in which the most valuable contributions are now written. Within the present century, the science of medicine has been prosecuted in France with a degree of enthusiasm and success before unknown, even in that cultivated nation; and many of the authors, whose productions we shall have to recommend—and, in some of the departments of medicine, the principal authors—are of that country.

Where the opportunities of the student will permit, the Italian and the Spanish, of the Romanic stem, and the Danish and Swedish, of the Teutonic, will amply repay him for the time and trouble, which he may devote to their acquisition. Italy was, at one time, the favored land, in which the tree of medical knowledge flourished, and spread its branches towards the other nations of Europe. Its universities were visited by the medical students of Great Britain and other

countries, to partake of the rich fruits there presented to them, and the reputation of many of her then professors will descend to posterity, along with that of those master spirits of antiquity to whom she owed her pristine glory. The various political revolutions, to which she has been subjected, in the present century, have checked the ardor of scientific investigation: still, we are indebted to her for many valuable works on the healing art, especially in the domain of Surgery, amongst which those of the distinguished Scarpa stand forth in bold relief.

Lastly.—There is one useful accomplishment, which may be recommended to form part of the education of every youth, intended for the medical profession;—the art of drawing,—especially as regards the parts of the human figure. Every one, who is ignorant of this art, must have regretted his inability to take the representations of striking cases of malformation or disease, the recollection of which he may have been desirous of perpetuating. Now—that the custom is universally followed by the medical teacher of addressing the eye by graphic illustrations, where the subject will admit of it—such an acquirement is doubly useful. How impaired in interest would be the ‘Anatomy of expression’ of Sir Charles Bell, if deprived of the embellishments from his pencil. Where the student has the least taste for designing, it ought to be fostered, and he will find ample opportunity, in after life, for being gratified with the attention he has given to it. The art of taking moulds is one, that can be readily acquired whilst his professional education is proceed-

ing. There are manuals,\* indeed, which teach the different methods of making anatomical preparations,—of which the taking of casts is one. All this is easily attained by a little practice.

\* See the Bibliography in the Appendix.

## CHAPTER II.

### MEDICAL EDUCATION, PRIOR TO ATTENDANCE ON LECTURES.

THE regulations for graduation of the chief medical colleges of the union require, that the student shall have applied himself to the study of medicine for three years, and that he shall have attended two full courses of medical lectures,—embracing the different departments to be enumerated hereafter. In the University of Pennsylvania, it is a rule, that during these three years he shall have been the private pupil, for two years at least, of a respectable practitioner of medicine. The latter part of this requisition is, however, rarely attended to: indeed, if the student, attending the prescribed courses of lectures, be from the country, where he has already studied one year, it will be obviously impracticable for him to complete his two years—in succession, at least—with the same instructor; and, if the rule were rigidly enforced, he would necessarily be constrained to seek a new preceptor on his arrival in town. In the Jefferson Medical College, and in the University of Maryland, the rule requires, that the candidate shall have applied himself to the study of medicine for three years, without specifying the period of private pupilage: whilst at the University of Virginia, no term is mentioned. The candidate is allowed to present himself for examination, at the end of the first session, if he feels himself



qualified. In the universities of Europe, no rule—as to private pupilage—exists. The candidate is required to have attended certain courses of lectures a prescribed number of times. After this, he may subject himself to examination, and, if found competent to practice his profession, he receives his diploma. A similar rule prevails—or did prevail—at the Royal College of Surgeons; but the Society of Apothecaries, of London, demand, that the student shall have served an apprenticeship with an apothecary for five years, as well as have attended a certain number of courses on medicine, before he can present himself before the Board of Examiners. Generally, however, when circumstances will allow of the indulgence; he is at liberty to attend lectures during the last two years of his apprenticeship; so that, if his age will permit, he may present himself for examination, at the time when his indentures are given up to him. This is the general practice with the metropolitan youths; as well as with many of those in the country; but some of the latter are retained to make pills and draughts, until the full period of five years has expired. The student is, indeed, in the latter stages of his apprenticeship, of greater value to his employer, so that if he be of steady and industrious habits, it is greatly to the master's interest to retain him. Preparing, as he does, his own medicine, the apothecary can teach him the practical matters, connected with the compounding of medicines, and the sensible and medical properties of drugs. He instructs him, moreover, how to bleed, glyster, draw teeth, &c.; and, not many years ago, it was the practice, in some of the country places of England,—and perhaps still is,—to require, that the medi-

cal pupil should attend to the horse, if his employer kept one,—see that it was regularly groomed, fed and watered, and bring it saddled to the door on all sudden emergencies! What an employment for the future member of a liberal and learned profession! and what a waste of time in a pupilage, thus unnecessarily protracted! The advantage to the master was looked to, in these requisitions, rather than that of the student;—a well-informed youth—well-informed, that is, on preliminary topics—and of ordinary abilities, being capable of attaining every thing taught him, in this long apprenticeship, in a single year well spent.

In the towns of the United States—as has been before remarked—it is the custom for the physician to send his prescriptions to the apothecary, who fills the same situation as the chemist and druggist of England, and the *pharmacien* of France. There are some, however,—especially of the older practitioners,—who have their prescriptions compounded in their own offices. As respects medical education, it is to be regretted, that the latter course is not universal, inasmuch as it affords the youth an admirable opportunity for becoming practised in the manipulations of pharmacy. Nothing but actual practice can make him well acquainted with the sensible properties of the various articles of the *Materia Medica*, and with the mode of preparing the different formulæ—officinal and extemporaneous; and when the physician, who has office-pupils, does not prepare his own prescriptions at home, he ought, at least, to be provided with a collection of specimens of the *Materia Medica*, which may enable the student to render himself familiar with their appearance: but this is only an imperfect succedaneum,

as it does not instruct him in the art of compounding. Many young men, consequently, pass through their medical education, and receive their diplomas, without ever, perhaps, having made a pill or a potion, and utterly ignorant of the method of uniting the articles, which they may have to prescribe at the outset of practice. Where persons can be found to do this—as in the cities—the evil is not of magnitude; but if the young practitioner has settled in a country situation, where no one can prepare his medicines for him, he finds that he has yet much to learn, and has ample grounds for deploring the imperfections of his pharmaceutical education. Formerly, it was common for the enlightened physicians of Great Britain to place their sons in some pharmacy, for a time, in order that they might attain that practical instruction, which such situations alone afford; but, of late years, the plan has been generally abandoned, and the physician, after he has passed through his three or four years of collegiate study, finds himself lamentably deficient in knowledge on this matter; although, fortunately, owing to the division of labor in the profession there, a physician can no where be found, without one or more apothecaries, or chemists and druggists being easily met with, by whom the formulæ can be compounded.

It has been a question with some, whether it is advisable for a young man to ‘read’—as it is termed—with a physician, before he commences his attendance on lectures? The regulations of our colleges, it has been seen, appear to contemplate that one year, at the least, should be so spent. The answer to the question will have to vary according to circumstances. There can be no doubt, that a well informed physician might put

the Tyro upon a course of study, which would materially benefit him: he might, too, be making him acquainted with the various therapeutical agents, and thus befit him for deriving full benefit from his collegiate course; but, there can be as little doubt, that an almost irreparable amount of mischief may be perpetrated by an unskilful preceptor: doctrines may be instilled which a length of time and labor only can displace, and habits of study may be engendered,—by no means adapted for satisfactory or enduring results. Under such circumstances, it would be better, that the mind of the student were a ‘*tabula rasa*’—an unsullied sheet—capable of receiving any impression, that may be made upon it; and of retaining such impressions unblurred by the defective observations—the ‘facts’ and hypotheses—of such as are themselves incapable of correct judgment.

But it is not only essential, that proper books should be placed in the hands of the student; there should be an appropriate selection of subjects, to be investigated by him in due sequence. It often happens, that the very first book, put into his hands, is on the ‘practice of physic,’—the department towards which all the others tend, and which cannot be comprehended without an adequate knowledge of its elements. It includes, in short, an acquaintance with Anatomy, Physiology, Pathology, General Therapeutics, *Materia Medica* and Chemistry. In other words, when an important organ is diseased, we must know the structure of the organ; the function which it executes in health; the characters of that function, when in a state of aberration; the indications to be laid down for transmuting the diseased into the healthy condition; the agent ca-



pable of carrying into effect such indication; and—if we put more than one article into the prescription—we must know, that the articles are not incompatible, unless we desire the chemical results of such incompatibility.

One of the greatest stumbling blocks in the path of the young student—and to the removal of which his endeavours should be early directed—is, the heterogeneous nomenclature in use, in all the departments of medical science, and which will probably be continued, —notwithstanding the various attempts to introduce some greater uniformity and simplicity—in consequence of the difficulty, that exists in every science, of modifying appellations, which are familiar to the older members, and any change from which must necessarily be attended with great inconvenience to them.

Another difficulty is, the formation of a nomenclature of a character satisfactory to all. In every science, terminology is an object meriting attention: and each term—if well chosen—should convey to the mind of the student a definite idea. The Lavoisierian nomenclature was a valuable gift to chemistry, and a salutary innovation upon established usages; but all the difficulties, that pervade nomenclatures in general, were found to apply to this; and, accordingly, many of the old names are still retained, and will be so, in spite of the efforts of the scientific chemist. This is strikingly evidenced in the cases of *calomel*, and *corrosive sublimate*,—substances, which, although differing essentially in their action on the animal economy, do not differ so much in their chemical constitution. Any nomenclature, consequently, which is found-



ed on chemical composition, must assign names to each somewhat similar. Accordingly, as they are both Chlorides of Mercury, the former has been termed the 'Proto-chloride,'—the latter, the 'Bichloride.' The London College terms them, erroneously, 'Submuriate,' and 'Oxymuriate;' whilst the Pharmacopœia of the United States calls the one, the 'mild chloride,' and the other the 'corrosive chloride,' of mercury.

Now, where there is so slight a difference in name, between an entirely harmless, and a most poisonous, chemical, mistakes may readily happen,—in compounding prescriptions, for example,—as is said to have been the fact, in more than one instance, soon after the change of name by the London College of Physicians,—the virulent 'oxymuriate' having been substituted, by accident, for the mild 'submuriate.' This probably led the Dublin College—not behind the sister institutions of Great Britain, in chemical knowledge—to retain the name 'calomel' for the one, and to adhere to that of 'corrosive muriate of mercury,' by which the other—the 'corrosive sublimate'—was, formerly, generally known.

Another reason, too, which has prevented the full adoption of the modern chemical nomenclature, is, that with the new lights, daily breaking in upon a science so constantly improving as chemistry, the views of chemists, regarding the precise composition of substances must change; and therefore, the names,—to keep pace with the science,—must undergo a corresponding mutation. Still, to one, who travels with the progress of science, this is no disadvantage; and to him, who does not, the modified name indicates, at

once, the new ideas, that are entertained of the composition of the article.

The same difficulties, in innovating on an established nomenclature,—however faulty it may be,—apply to Anatomy, where all is fixed; and although Barclay, Dumas, Chaussier, and others, have attempted to give names to parts indicative of their situation, connections &c., the old unmeaning names are still retained, and the anatomical teacher, who is most anxious to keep up with the spirit of the times, feels it difficult—nay impracticable—to introduce so great a change:—

“Such dupes are men to custom, and so prone  
To rev'rence what is ancient, and can plead  
A course of long observance for its use.”

The truth seems to be, that where the English language is spoken, there is a greater objection to the introduction of new words than elsewhere; and, accordingly, almost all our new scientific terms are coined in France or Germany, and then imported into Great Britain, and this country; as if the transgression were more venial—to give currency to the coin than to fabricate it. “Neology, or the novelty of words and phrases,” says the author of the ‘Curiosities of Literature,’\* “is an innovation, which, with the opulence of our present language, the English philologist is most jealous to allow; but we have puritans or precisians in English, superstitiously nice! The fantastic coinage of affectation or caprice will cease to circulate from its own alloy; but shall we reject the ore of fine workmanship and solid weight? There is no government

\* ‘Second Series,’ Vol. I. 251, Amer. Edit. Boston, 1834.

of words, and it is no statutable offence to invent a felicitous or daring expression, unauthorized by Mr. Todd."

The same objection to the introduction of new words prevailed, however, long before the language attained its present opulence. In one of our old plays, the neologist is described as one, who,—

———"Strikes no coin, 'tis true, but coins new phrases,  
And vends them forth as knaves vend gilded counters,  
Which wise men scorn, and fools accept in payment."

Yet it is somewhat strange, that the objection should have extended, with us, to the introduction of new scientific terms. As science improves, the words, previously in use, are insufficient to express the new ideas, and neologisms become not only pardonable, but indispensable. Fortunately, the French and German literati have an insatiable desire for this application of philology, so that the toil of invention is spared us; and all that is necessary is to make a judicious selection.

The nomenclature of disease has required the greatest attention, and although repeated attempts have been made to improve it, the barbarous terms, sanctioned by usage, are still retained, in preference to the more classical. As it now exists, it consists of Hebrew and Arabic terms; Greek and Latin, French, Italian, Spanish, German, English, and even Indian and African, often barbarously and illegitimately compounded.\*

The object of modern terminologists has been to

\* Dr. J. M. Good, in 'Transactions of the Medical Society of London,' vol. i. part I. p. 3: and sect. ii. of a Preliminary Dissertation to his 'Physiological System of Nosology.'

rectify this chaos; and, by the use of a learned language, which admits of the ready formation of compounds, and which is every where more or less studied, to apply names, that may indicate the suffering organ, or the precise character of the morbid derangement, so far as this can be done by names only. But, where so much latitude is permitted, it would be strange if the privilege were not occasionally abused, and if terms were not, at times, proposed merely to exhibit the learning of the inventors. Accordingly, we find such words as *pathopatridalgia*, *philopatridalgia*, and *philopatridomania*, applied to the affection, commonly termed *nostalgia*,—a variety of melancholy, produced by the desire of returning to one's country or home, and which is described, by the French medical writers, as having been extremely common amongst the troops,—and especially amongst the auxiliaries from other countries,—formerly sent on their distant expeditions.

The *ne plus ultra*, however, of terminology 'run mad,' is to be found in a treatise on 'Croup,' published, within the last twelve years, by Bland,—a respectable French physician. This disease,—too well known amongst us, and indeed, in almost every nation of Europe, by its English name *croup*,—inasmuch as it is seated in the parts of the windpipe, called the larynx and trachea,—and as the inflammation is accompanied by increased secretion of mucus,—sometimes of pus, sometimes of membrane, and sometimes of all together,—Bland proposes—with the view of comprising all these conditions in the name—to call by the scarcely pronounceable one of *laryngo-tracheite-myxa-pyoméninogène*.—So far, the term has, happily, rested with its propounder.

It is fortunate for the student, that although medical technology is sufficiently copious, and, at times, extravagant, such an unnecessary tax is rarely, if ever, imposed on the memory, as in the case of the instances cited. Considerable simplicity will, indeed, be found to exist, even where the first impression may have been one of complexity. Still, as Dr. Good has properly remarked, a serious evil is the want of a common principle upon which the technical terms of medicine have been founded. They have been formed:—*first*, from *colour*: and hence there are black, white, green, red, scarlet, yellow and purple diseases,—as melæna, melas, atrabilis, melancholia, leuce, alphas, albugo, chlorosis, rosa, roseola, rubedo, rubeola, erythema, scarlatina, icteritia, aurigo, purpura, &c. *Secondly*:—they have been designated, according to *time*;—as acute and chronic; ephemeral or quotidian; continent or continued; remittent and intermittent; tertian, quartan, quintan, autumnal, and vernal fevers; summer complaint, &c. &c. *Thirdly*: from objects of natural history,—*birds, beasts, fishes, insects and plants*,—as fames canina, cynorexia (*doghunger*); rabies canina, cynolissa (*dogmadness*); hippos (*horse twinkle*); scrofula (*swine evil*); elephantiasis (*elephant skin*); ichtiiosis (*fish skin*); cancer, (*crab ulcer*); tarantismus (*tarantula dance*); urticaria (*nettle rash*); lichen (*liverwort rash*), &c. &c. *Fourthly*: from the names of *persons or places*; as morbus Herculeus (*epilepsy*); facies Hippocratica; lepra Arabum; lepra Græcorum; plica Polonica; sudor Anglicus; morbus Gallicus; morbus Hungaricus; ignis Sancti Antonii; chorea Sancti Viti; Dæmonomania, &c. &c.

The nomenclature of anatomy is not less fantastic.



Often, it is dependent upon fancied resemblance; as to basins (*pelves*); cups (*cotylloid cavities*); the beak of a crow (*coracoid*); a thorn (the *spine* and *spinous* processes); an ancient pen (*styloid*); and, in the brain alone,—as Dr. Good has remarked,—we meet with an assemblage of terms, so ridiculously diversified in their sources, as frequently to overpower the gravity of the face in running them over; and at the same time so obscene in many of their references, as to render it impossible to read them aloud except in a dead language.\*

To facilitate the labors of the student, in acquiring some of the principles of medical technology, as it now exists, the following glossary of the prefixes, suffixes, and radicals of many of the terms legitimately compounded, especially from the Greek, may be found useful.†

## A.

A : before a consonant; *An* before a vowel, has—in the compound medical terms—a privative or debasing signification, like that of the particles *in*, *im*, *un*, *ir*, in English. Thus, *Sthenia* (*σθενης*) means strength; *Asthenia*; want of strength, debility. *Acephalous* (*κεφαλη*, ‘head’); devoid of head. *Anencephalous* (*εγκεφαλον*, ‘the brain’), a fœtus with an imperfect brain. *Acardia* (*καρδια*, ‘heart’); devoid of heart. *Anæmia* (*αιμα*, ‘blood’); want of blood.

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\* ‘Transactions of the Medical Society of London,’ Lib. cit. p. 13.

† When the author wrote the following glossary, he was not aware that the plan had suggested itself to any other individual. Since it was written, he has seen ‘A Dictionary of Terms used in Medicine, &c.,’ by Richard D. Hoblyn, published in London, during the last year, which shows, that the same idea had occurred to him. The two glossaries, however, are identical in idea only.

ACROS, 'elevated; at the top,' (*ἄκρος*); as *Acrocheir* (*χειρ*, 'the hand,') the extremity of the hand or fingers. *Aerōmion* (*ωμος*, 'the shoulder,') the top of the shoulder.

ADEN (*ἀδην*) 'a gland;' hence, *Adenalgia* (*αλγος*, 'pain') glandular pain. *Adenemphraxis* (*ἐμφραξις*, 'obstruction') glandular obstruction. *Adenitis*, (see *Iris*) glandular inflammation. *Adenology*. (*λογία*, 'description,') a treatise on the glands. *Adenomeningea*, (*μηνιγξ*, 'a membrane') mucous fever, because seated in the glands or follicles of the mucous membrane of the stomach and bowels. *Adenoncus* (*ογκος*, 'a tumor,') a swelling of the glands.

ÆDŒA (*αἰδοια*) 'the parts of generation.' Hence, *Ædœitis*, inflammation of the genital organs; *Ædœodynia* (see *ODYNE*) 'pain in the genital organs;' and *Ædœopsophia* (*ψοφειω*, 'I emit a noise') a discharge of air from the parts of generation.

ÆMA, see HÆMA.

ÆRĒSIS, (*αἰρεσις*) 'the removal of any thing.' A suffix denoting 'a removal or separation,' as *aphærēsis* (*απο*, 'from,') the removal of any part. *Diærēsis* (*δια*, 'through') a breach of continuity.

ÆSTHĒMA (*αἰσθημα*, genitive *αἰσθηματος*,) 'a sensation,' 'a perception.' Hence, *Æsthematonūsi* (*νοσοι*, 'diseases,') and *Æsthetica*, 'diseases affecting sensation;' *Æsthematorganonūsi*, 'diseases of the organs of sensation.'

AGOGUE, (*αγωγος*, 'a leader') from *αγω*, 'I lead or expel.' Hence, *cholagogue* (*χολη*, 'bile') an expeller of bile. *Hydragogue* (*ιδωρ*, 'water') a medicine, which causes watery evacuations.'

AGRA (*αγρα*, from *αγρεω*, 'I seize,' 'I lay hold of,') 'a seizure:' as *odontāgra*, (*οδους*—genitive *οδοντος* 'a tooth,') toothache; *Chirāgra* (*χειρ*, 'the hand') gout in the hand; *Podāgra* (*πους*, 'the foot,') gout in the foot.

AGRYPNUS (*αγρυπνος*) 'sleepless,' 'vigilant.' *Agrypnocōma* (*χωμα* 'stupor,') 'sleeplessness, with great inclination to sleep.' *Agrypnōdes* (*febris*, *πυρετος*) (*ειδος*, 'resemblance,') 'fever attended with watching.'

AIMA. See HÆMA.

ALGOS (*αλγος*) 'pain,' also *Algēma* (*αλγημα*), and *Algēsis* (*αλγησις*) with the same signification. *Algelicus* (*αλγητικος*), painful:—as *epilepsia algelica*, 'epilepsy caused by pain,' &c. &c. The suffix *algia* has the same signification,—as in 'Cephalalgia' (*κεφαλη*, 'the head') headache; *Pleuralgia* (*πλευρον*, 'the side') a pain in the side; *Neuralgia* (*νευρον*, 'a nerve') nerveache, &c.

ALLAS (αλλας) 'a sausage.' Hence, *Allantōdes* or *Allantoīdes* (ειδος, 'shape') sausage-shaped, the Allantois; *Allantotoxium* (τοξικον, 'a poison') sausage poison.

ALLOS (αλλος) 'another,' 'different'—as *Allopathia* (παθος, 'disease') the opposite to homœopathy,—the ordinary doctrine of medical practice: *Allotriophagia* (αλλοτριος, 'foreign,' and φαγεω 'I eat') a morbid appetite for substances, that are not alimentary.

AMBLUS (αμβλυσ) 'obscure.' Hence, *Amblyopia* (οφθια, 'vision') feebleness of vision.

AMNOS (αμνος,) 'a sheep.' Hence, *Amnion* (αμνιον, άμνειον) the innermost of the fœtal membranes;—because first observed in the sheep (?). *Amniocleptis*, (κλεπτω, 'I steal or take away unobserved') the too early discharge of the liquor animi: *Amnitis* or *Amniitis*, inflammation of the amnion, &c.

AMPHI (αμφι) 'both, around, on all sides.' *Amphiarthrosis* (αρθρον, 'a joint') a mixed articulation, where there is an intermediate body between the bones, as in the joints of the vertebral column. *Amphiblestrōdes tunica* (αμφιβληστρον, 'a net') the retina. *Amphibranchia* (βραγχια, 'the gills') the tonsils and surrounding parts. *Amphidexios* (δεξιος, 'dexter, right.') 'ambidexter;' one who uses both hands, with equal facility.

ANA (ανα) 'in,' 'through' 'upwards,' 'above,'—in opposition to CATÀ (q. v.); also, 'repetition,' like the English *re*. *Anabasis* (βαινω, 'I go') the period of increment of a disease. *Anabexis* (βηξ, 'a cough') expectoration. *Anacatharsis* (καθαρσις, 'purging') purgation upwards, by expectoration or by vomiting. *Anadiplōsis* (διπλωσις, 'a doubling'). 'The reduplication of an intermittent. *Analeptic* (αναληπτικον) 'restorative.' A restorative medicine. *Anasarca* (σαρξ, 'the flesh') dropsy of the cellular membrane. *Anaspadixus* (σπαω, 'I contract,') one, whose urethra opens on the upper part of the male organ. *Anastomōsis* (στομα, 'a mouth,') inosculation: a communication between two vessels. *Anatomy* (τομη, 'incision') dissection. 'The doctrine of the structure of the organism.

ANCOS (αγκος) 'a hook,' 'an angle.' Hence, *Ancon*, (αγκων) the bend of the elbow; and *Ancylē* (αγκυλη), having the same signification as *Ancos* and *Ancon*. *Ancyloblepharon* (βλεφαρον, 'the eyelid') growing together of the eyelids. *Ancylosis*, a stiff joint.

ANDRIA (ανδρια, ανδρεια) manhood, virility. Hence, *Andranatomy*, the anatomy of man. *Androgynous* (γυνη, 'a woman') hermaphroditic: *Andromania*, nymphomania.

ANGOS (αγγος) 'a vessel,' and *Angion* or *Angeion* (αγγειον,) 'a small vessel.' Hence, *Angiology* (λογος, 'a discourse') a treatise on the vessels. *Angiopathia* (παθος, 'disease') a disease of the vessels. *Angiostcōsis* (οσσειον, 'a bone') ossification of the vessels. *Angiotomy* (τομη, 'incision') dissection of the vessels.

ANO (ανω) 'above,' 'up;' as *Anochilon* (χειλος, 'the lip') having a large upper lip.

ANTI (αντι), in composition, generally means opposition; as *Antalgic* (see ALGOS), an anodyne. *Antarthritic* (see ARTHRON) a gout remedy. *Anthēlix* (ελix, 'the helix of the ear') an eminence in front of the helix of the ear: *Anthelmintic* (ελμινς, 'a worm') a vermifuge. *Antiplarmāca* (φαρμακον, 'a poison') an *Antidote*, (δωω, 'I give').

ANTIADDES (αντιαδεις) 'the tonsils.' Hence, *Antiaditis*, inflammation of the tonsils. *Antiadoneus* (ογκος, 'a tumor') swelling of the tonsils.

ANTHRŌPOS (ανθρωπος) 'man.' Hence, *Anthropography* (γραφη, 'a description') the Natural History of Man: as well as *Anthropology* (λογος, 'a discourse'). *Anthrophagūs* (φαγω, 'I eat') a man-eater. *Anthropotomy* (τομη, 'incision') the anatomy of man.

APHĒ, See HAPHĒ.

APO (απο) 'from, of, off,' as *Apogalactismus* (γαλα, 'milk') weaning. *Aponeurōsis* (νευρον, 'a nerve') formerly considered to mean nervous,—a tendinous expansion, or covering to a muscle. *Apophysis* (φνω, 'I rise out') a process. *Apoplexy* (πλησσω, future πληξω, 'I strike').

ARACHNĒ (αραχνη) 'a spider, a spider's web.' *Arachnōdes* or *arachnōides* (ειδος, 'resemblance') like unto a spider's web; as the tunica *arachnoides* of the brain. *Arachnoiditis*, *Arachnitis* (see ITIS) inflammation of the arachnoid.

ARCHOS (αρχος) the fundament, the breech. *Archosyrinx* (συνεγξ, 'a pipe or fistula') fistula in ano. *Archoptōma* and *archoptōsis* (πτωμα, and πτωσις, 'a falling down') prolapsus ani.

ARTHRON (αρθρον) 'a joint.' Hence, *Arthralgia* (see *algia*) pain in the joints. *Arthritis*, and *Arthrōsia* (Goop), inflammation of the joints: gout. *Arthrodynia* (οδυνη, 'pain') jointache.

ARYTÆNA (αρτυαινα) 'a ladle.' Hence, *Arytænōdes*, *Arytenōides* (ειδος 'resemblance') *Arytenoid*: as the arytenoid cartilages.

ATELES (ατελης,) 'imperfect, defective.' As *atelocardia* (καρδια, 'heart') a fœtus with an imperfect heart. *Atelencephalia* (εγκεφαλον, 'brain') the state of a fœtus with an imperfect brain.



ATHIER (ἀθήρη) 'an ear of corn.' Hence, *Athēra*, *Athērē* (ἀθήρα, ἀθήρη) a pap, made of meal: *Atherōdes* (εἶδος) paplike: and *Atherōma*, a tumor containing a paplike substance.

ATLAS (Ἀτλας) the first vertebra; so called from its supporting the head, as Atlas did the globe. Called, also, *Atloid* (εἶδος 'resemblance'). Atlaslike.

AUTOS (αὐτός), in composition, 'self,' 'the same.' Hence, *Authēmerus* (ἡμέρα, 'a day') happening on the same day. *Autocheiria* (χειρ, 'hand') selfmurder. *Autopsy* (ὥψις, 'inspection') self-inspection: improperly used for post mortem inspection. *Autocraīa* (κρατος, 'strength') the vis medicatrix naturæ.

AXON (ἄξων) '*Axis*, an axletree,' the second vertebra of the neck; also called *Axoid* (εἶδος) 'form.'

## B.

BALANUS (βαλανός) 'a glans or acorn'—The glans penis. *Balano-blennorrhœa* (see BLENNÆ) Blenorrhœa of the glans. *Balanītis*, inflammation of the glans.

BARYS (βαρύς) 'heavy, difficult.' Hence *Baryecōia* (ακοη,—in composition, ηχοια, 'hearing'); hardness of hearing. *Baryodyñē* (ὀδυνή, 'pain') a dull, constant pain.

BDELLA (βδέλλα) 'a leech.' Hence, *Bdellomēter* (μέτρον, 'a measure.') An instrument proposed as a substitute for the leech.

BI, see DI.

BIOS (βίος) 'life.' Hence *Biodynamics*, (δυναμεις, 'power') The doctrine of the vital forces. *Biology*, (λογος 'a description') the doctrine of life.

BLECHROS (βληχρός) 'weak,' feeble. Hence, *Blechropyra* (πυρ, 'fire.') A slight fever. *Blechrosphygmia* (σφυγμος, 'the pulse.') A weak pulse.

BLENNÆ (βλεννα,) 'mucus.' *Blennoptÿsis* (πτω, 'I spit') an expectoration of mucus. *Blennopyra* (πυρ, 'fire,') A mucous fever. *Blennorrhagia* (ραγή, 'a breaking forth.') Gonorrhœa, also *Blennorrhœa*, (ρῆω, 'I flow.')

BLEPHARON (βλεφαρον) 'the eyelid,' Hence, *Blepharītis*. Inflammation of the eyelid. *Blepharoblennorrhœa*, a mucous discharge from the eyelids. Gonorrhœal ophthalmia. *Blepharœdēma* (οίδημα, 'a watery swelling.') Œdema of the eyelids. *Blepharophththalmia*, inflammation of the eyelids. *Blepharoplēgia* (πληγη, 'a stroke')



paralysis of the eyelids; as well as, *Blepharoptōsis* (πτῶσις, 'a falling down.')

**BOTHRIUM** (Βοθρίον) 'a small hole.' Whence, *Bothriocephālus* (κεφαλή, 'the head.') A species of tape-worm.

**BRACHYS** (Βραχυς,) 'short.' Whence, *Brachypnœa*, (πνοή, 'breath.')

Shortness of breath.

**BRADYS** (Βραδύς) 'difficult.' Hence, *Bradyeōia* (ἡχοια, 'hearing.')

Difficulty of hearing. *Bradymasēsis* (μασῆσις, 'mastication,') difficulty of mastication. *Bradypepsia*, (πεψίς, 'coction,') tardiness of digestion.

**BROMA** (Βρώμα, genitive Βρώματος,) 'food.' Hence, *Bromatography* (γραφή, 'a description.')

A description of aliments: and *Bromatology* (λογία, 'a description.')

The doctrine of aliments.

**N. B. BROMINE** is not from this radical, but from Βρώμος, 'a stench,' or 'smell,' especially the smell of the male goat.

**BRONCHUS** (Βρογχος) 'the windpipe.' *Bronchia*, (Βρογchia) the ramifications of the windpipe. *Bronchitis*, inflammation of the bronchia. *Bronchocēlē* (κῆλη, 'a swelling,' 'hernia,') the goitre. *Bronchotomy* (τομή, 'incision.')

The operation of opening the windpipe.

**BU** (Βου, abbreviation of Βους, 'an ox,') in composition, expresses 'excess,' 'greatness.' Hence, *Bulīmus* (λιμός, 'hunger,') ox-appetite; voracious appetite. *Buphthalmus* (οφθαλμός 'eye.')

Ox-eye.

Dropsy in the eye,

**BUBO** (Βουβων) 'the groin;' the inguinal glands. Hence, *Bubonalgia*, (see **ALGOS.**) Pain in the groin. *Bubonocēlē* (κῆλη, 'rupture.')

Inguinal hernia.

## C.

**CACOS** (κακος) in composition, 'badness,' 'faultiness,' 'deficiency.' *Cachexia* (ἔξις, 'habit,') a bad habit of body. *Cucochymia* (χυμός, 'juice.')

A bad condition of the humors. *Cacoēthes* (ἦθος, 'disposition,' 'habit.')

Of a bad or vitiated character.

**CARCINOS** (καρκινος) 'a crab.' Hence *Carcinōdes*, *Carcinoīdes* (εἶδος, 'resemblance,') crablike, cancerlike,—as *ulcera carcinodea*.

**CARCINOMA** (νομή, 'an eating ulcer,') a cancerous ulcer or tumor.

**CARDIA** (καρδία) the heart. Also, the upper orifice of the stomach. Hence, *Cardiaca*, cordials. *Cardialgia* (αλγος, 'pain.')

Pain in the stomach. Heartburn. *Cardiopalmus* (παλμος, 'palpitation,')

palpitation of the heart. *Cardiorrhexis* (ρηξις, 'rupture.') Rupture of the heart. *Carditis*, inflammation of the heart.

CARA (καρα) 'the head;' and CAROS (καρος) 'stupor.' Hence *Carōsis*, stupefaction. *Caroticus* (καρωτικός) any thing that causes stupor. *Carotid*, the artery of the head.

CARPHUS (καρφος) any light flocculent substance; also, dried straw. Hence, *Carphologia* (λεγω, 'I collect,' 'I pluck.') Picking the bed clothes, as if to gather flocculi.

CATA (κατα) 'downwards,' 'after,' applied to time. Hence, *Catalepsy* (ληψις, 'a seizing hold of,' 'an attack.') *Catamēnia*, (μην 'a month.') 'The menses. *Catarrhus* (ρεω, 'I flow,') a catarrh. *Catharsis*, (αιρω, 'I take away.') Purgation. *Cathēmerinis* (ἡμερα, 'a day,') daily: καθ' ἡμέραν, *per diem*. *Catheter* (ιημι, 'to send.') An instrument for drawing off the urine.

CATO (κατω) 'beneath.' Hence *Catōchilon* (χειλων 'the lip,') The under lip.

CAUMA (καυμα) 'a burnt part.' This and the following are from καιω, 'I burn.' *Causus* (καυσος) 'a burning fever.' *Causōdes* (ειδος, 'resemblance,') 'burning,' as *Febrius causodes*,—the same as Causus. *Caustic*, a burning or corrosive agent. *Cautery* (καυτηριον) a burning agent.

CELE (κελη) 'a tumor,' 'a rupture.' A very common suffix; as *Bubonocēlē* (see BUBON.) *Hydrocēlē*, (see HYDOR.) *Cclotomia* (τομη, 'incision,') an operation for rupture.

CENOS (κενος) 'empty;' as *Cencangia* (κενεαγγειη.) (αγγειον, 'a vessel.') Emptiness of vessels. *Cenōsis* (κενωσις,) Evacuation. Inanition.

CEPHALE (κεφαλη) 'the head.' Hence, *Cephalæa* (κεφαλαια) violent headache. *Cephalāgra*, (see AGRA.) Gout in the head. *Cephalalgia* (κεφαλαλγια,) (see ALGIA.) Headache. *Cephalitis*. Inflammation of the interior of the head: and *Encephalitis*. *Cephalotomia* (τομη, 'incision,') opening the head—as of the fœtus.

CERAS (κερας, genitive κερατος,) 'Horn;' also, the 'Cornea.' *Ceratēctomia* (εκτομος, 'cut out.') An incision through the cornea. *Ceratitis*. Inflammation of the cornea. *Ceratocēlē*, (see CELE.) A protrusion of the cornea. *Hernia Cornææ*. *Ceratonyxis* (νυξις, 'a puncture.') Puncture of the cornea in the operation of couching. *Ceratōdōmus* (τομη, 'incision,') An instrument for puncturing the cornea, in the operation for cataract.

N. B. *Cerato*—in composition, in the names of museles—is used

for the cornu of the os hyoides:—as *cerato-pharyngeus*,—*Cerato-glossus*, &c.

CERCCS (κερκος) ‘a tail.’ Hence, *Cercōsis*, (κερκωσις) a preternatural elongation of the clitoris.

CEROS (κηρος) ‘wax.’ *Cerōdes* (ειδος, ‘resemblance.’) Waxlike. *Cerōma* (κηρωμα) cerate. Also, a tumor, with waxlike contents.

CHEILOS (χειλος) ‘a lip.’ Hence, *Cheilon* or *Chilon*, (χειλων) one having a thick lip. *Cheiloncus* or *Chiloncus*, (ογκος, ‘a tumor,’) a swelling of the lip. *Cheilītis* or *Chilītis*. Inflammation of the lip.

CHIR or CHEIR (χειρ) ‘the hand.’ Hence, *Chirāgra* (See AGRA) gout in the hand: *chiriatriā* (ιατρειᾶ, ‘healing’) and *chirurgia* (χειρουργία, (εργον, ‘work’) surgery.

CHLOROS (χλωρος, ‘green’.) Hence *chlora*, *chlorine*,—because, a greenish gas. *Chlorōsis*, the green sickness.

CHOLE (χολη) ‘bile;’ also *Cholos* (χολος). Hence, *Cholagogue* (αγω, ‘I expel’) a bile expeller. *Cholecystis* (κυστις, ‘a bladder’) the gallbladder. *Choledōchus* (δεχομαι, ‘to receive’) as the choledoch duct, which receives and conveys the bile into the intestines. *Cholelithos* (λιθος, ‘a stone’) a gallstone. *Cholēra* (χολερα) and *Cholera morbus*. *Cholesterinc* (στεαρ, ‘suet’) the crystalline part of certain biliary calculi. *Cholōses*. Biliary diseases.

CHOLOS (χωλος) ‘lame.’ Hence, *Cholōsis* and *Cholansis*, laming and lameness; Paralysis.

CHONDROS (χονδρος) ‘a cartilage.’ Hence, *Chondrography* (γραφη, ‘a description’) a description of the cartilages; and *Chondrology* (λογος, ‘a discourse.’)

CHORION (χοριον) ‘skin,’ ‘leather,’ the skin; (*Corium*) especially the true skin: also, the external membrane of the ovum. *Chorioid* or *Choroid* (ειδος, ‘resemblance,’) leatherlike, or skinlike. One of the coats of the eye.

CHORUS (χορος) ‘a dance,’—especially in a circle. Hence, *Chorēa* (χορεία) ‘St. Vitus’s dance: and *Choromania*; having the same signification.

CHROMA (χρωμα) ‘colour;’ as *Achromatopsia* (α, privative and οψις, sight) impracticability of discriminating colors.

CHYLUS (χυλος) ‘juice,’ ‘moisture.’ Chyle. Hence, *Chylopoietic* (ποιεω, ‘I make’) chyle making. *Chylōsis* (χυλωσις) ‘the formation of chyle. *Chylification*.

CHYMUS (χυμος) 'a sap or juice,' chyme. Hence, *Chymistry* [?]. *Chymōsis* (χυμωσις) 'the formation of chyme.' *Chymification*.

CINEO (κινεω) 'I move.' Hence, *Cinēma* (κινημα) and *Cinēsis* (κινησις) 'motion.' *Cinonōsi* (νοσος, 'disease') diseases of motion. *Cinoplanēsis* (πλανησις, 'a wandering about'). Irregularity of voluntary motion.

CIOXIS (κιοις) 'the uvula.' Hence *Cionitis*, inflammation of the uvula.

CIRSOS (κίρσος) 'a varix.' Hence, *Cirsocēlē* (κηλη, 'a tumour') a varicose state of the spermatic veins. *Cirsotomy* (τομη 'incision') the operation for the removal of varices.

CLEIS (κλεις, genitive κλειδος, 'a key:') *Clavis*; also, the Clavicle. Hence, *Cleidāgra* (See AGRA). Gout in the clavicle; also, *Cleisāgra*.

CLIMAX (κλιμαξ) 'a stair.' Hence, *Climacter* (κλιμακτηρ) a step; a climacter; every seventh year, or period of life, which has been esteemed critical;—Auni *Climacterici*.

CLINE (κλινη) 'a bed.' Hence, *Clinical* (κλινικός.) *Clinoid* (κλινοειδής) (ειδος, 'shape') bedshaped, as the *Clinoid* processes.

COCCYX (κοκκυξ) 'the cuckoo.' The Os *coccygis*, or rump-bone. Hence, also, *Coccygeus*, a muscle appertaining to the rumpbone. *Coccycephalous* (κεφαλη, 'the head'). A fœtus having the head shaped like the coccyx.

CÆLIA (κοιλία) 'a hollow place,' the belly. Hence, *Cælialgia* (αλγος, 'pain') bellyache; and *Cæliorrhœa* (ρεια, 'I flow') diarrhœa. *Cæliaca*; diseases of the digestive function. [GOOD.] *Cæliopyōsis* (πυον, 'pus'). Abscess of the abdomen.

CÆNOS (κοινος) 'common.' Hence, *Cæna*, supper; the common evening meal: and *Cænæsthēsis* (αισθησις, 'feeling') common feeling.

COLEOS (κολεος) 'a sheath,' the vagina. Hence, *Coleitis* and *Coleositis*. Inflammation of the vagina.

COLON (κωλον) from κοιλος, 'hollow.' The largest of the bowels. Hence, *Colica* ('η κολικα νοσος) the colic; *Colicodynia* (οδυνη 'pain.') *Colitis*. Inflammation of the colon.

COLPOS (κολπος, 'a gulph') the vagina. Hence, *Colpalgia*, (αλγος, 'pain'), pain in the vagina. *Colpitis*, inflammation of the vagina. *Colporiōsis* (πτωσις, 'prolapsus') prolapsus vaginæ.

COMA (κωμα) 'a lethargic sleep.' Hence, *Comatōdes* (κωματωδής) and *Comatose*, drowsy.

CONDYLUS (κονδυλος) 'a tuberosity,' 'a knuckle,' a process. Hence, *Condyle*, a knotty elevation. *Condylōdes* and *Condylōides* (ειδος,

'resemblance') condyloid, having the shape of a condyle; and *Condyloīma* (κοιδυλωμα) a fleshy protuberance, of a knotshape. *Epicondyle* (επι, 'upon') an eminence on the outer condyle of the os humeri. [CHAUSSIER.]

*COPOS* (κοπος) a feeling of fatigue or weariness in a part. As *Osteoöpus* (οστεον, 'a bone') feeling of weariness or pain in a bone.

*COPROS* (κορος) 'excrement.' Hence, *Copracratia* (ακρατεια, 'want of power') involuntary discharge of the fæces. *Copragogue* (αγω, 'I expel') a cathartic. *Copremesis* (εμεσις, 'vomiting') stercoraceous vomiting. *Coprorrhæa* (ρρω, 'I flow') diarrhæa. *Coprosclerōsis*, and *Coprosclerōīma* (σκληρος, 'dry,' 'hard') hardness of the fæces. *Coprostasia* and *coprostasis* (στασις, 'stagnation') constipation.

*CORAX* (κοραξ) 'a raven.' Hence, *Caracōdes* and *Caracoīdes* (ειδος, 'form') having the form of a raven, or of a raven's beak; as the coracoid process of the scapula.

*CORE* (κορη) 'the pupil.' Hence, *Coreetomia* (εκτομη, 'excision') the formation of an artificial pupil.

*COTYLA* and *COTYLE* (κοτυλη) 'a hollow,' 'a deep hollow.' Hence, *Cotylēdon* (κοτυληδων) the acetabulum; a lobe of the placenta, &c. *Cotylōdes*, *Cytoloīdes* (ειδος, 'form') Cotyloid; as the cotyloid cavity.

*COXA*, 'the hip,' the hipjoint. Hence, *Coxāgra* (αγχα, 'seizure') gout in the hip. *Coxalgia* (αλγος, 'pain,') pain in the hip. *Coxitis*. Inflammation of the hip.

*CRANION* (κρανιον) 'the skull.' Hence, *Craniology* (λογος, 'a description'); Phrenology. *Craniometry* (μετρον, 'a measure') measurement of the skull. *Cranioseopy* (σκοπεω, 'I inspect') inspection or examination of the skull. *Hemicrania* (ημι, 'one half') a pain in half the head.) *Olecranon* (ωλειη, 'the ulna') the head of the ulna.

*CRICOS* (κρικος) 'a ring.' Hence, *Cricōdes*, *Cricoīdes* (κρικωδης, κριχοειδης) ringshaped (ειδος, 'shape,') as the ericoid cartilage.

*CROCIS* and *CROCYS* (ροκισ and ροκυσ) 'the nap on cloth.' Hence, *Crocidismus*, the like signification as *Carphologia*.

*CRYPTOS* (κρυπτος) 'concealed.' Hence, *Crypsorchis* or *Cryptorchis* (ορχις, 'a testicle') one, whose testes have not descended. *Cryptocephalous* (κεφαλη, 'the head') a fœtus with the head not visible externally.

*CYANEUS* (κυανεος, κυανος, 'blue.') Hence, *Cyanogene* (γενναω, 'I engender') 'a generator of blue.' The basis of the Hydrocyanic



acid. (Germ. *Blaustoff*.) *Cyanopathia* (παθος, 'disease,') and *Cyanosis*, the blue disease.

*CYŌ* (κύω,) 'I conceive,' 'I am pregnant.' Hence, *Cyēma*, (κυημα) the embryo; and *Cyēsis* and *Cyophōria* (φέρω, 'I carry,') pregnancy.

*CYON* (κυων) 'a dog.' Hence, *Cynanchē* (αγκω, 'I choke') sore-throat; properly, *Synanche* (?). *Cynicus*, and *Cynōdes* (εidos, 'form,') *Cynic*, as 'Cynie spasm.' *Cynolyssa* (λυσσα, 'madness,') *Rabies canina*. *Cynorexia* (ορεξις, 'appetite,') *Fames canina*.

*CYSTIS* (κυστις) 'a bladder,' especially the urinary bladder. Hence, *Cystalgia* (αλγος, 'pain,') Pain in the bladder, *Cystitis*, inflammation of the bladder. *Cystotomy*, (τομή, 'incision,') Lithotomy. *Cystencephalous* (εγκεφαλον, 'brain,') A fœtus having a vesicular brain.

*CYTOS* (κυτος) 'the skin.' Hence, *Cyfitis*. Inflammation of the skin. See *SCYTOS*.

## D.

*DACRY*, *DACRYON*, (δακρυ, δακρυον,) 'a tear.' Hence, *Dacryadenitis* (αδην, 'a gland,') Inflammation of the lachrymal gland. *Dacryocystitis* (κυστις, 'a bladder,') Inflammation of the lachrymal sac. *Dacryosyrinx* (συριγξ, 'a fistula,') *Fistula lachrymalis*.

*DACTYLUS* (δακτυλος) 'a finger.' Hence, *Dactylitis*. Paronychia or whitlow. *Dodedactylitis* (δωδεκα, 'twelve,') Inflammation of the duodenum.

*DELTA* (δελτα) the Greek letter Δ. Hence, *Deltoid* (εidos, 'form,') resembling the letter Δ, as the deltoid muscle.

*DEMOS* (δημος, 'the people,') Hence, *Endemic* (εν, 'in,') A disease peculiar to a people or country. *Epidemic* (επι, 'upon,') An atmospheric disease.

*DERE* (δεξη) 'the neck.' Hence, *Derencephalous* (εγκεφαλον, 'the brain,') A fœtus, having the head and brain in the neck.

*DESMA*, *DESME*, *DESMOS* (δεσμα, δεσμη, δεσμος, 'a band or bond,') A ligament. Hence, *Desmography* (γραφη, 'a description,') A description of the ligaments.

*DI*, (δι, δις) 'bis, twice, double.' Hence, *Dicrotus* (προτεω, 'I strike,') beating double; as *Pulsus dicrotus*. *Digastricus* (γαστηρ, 'the belly,') double-bellied. *Diploë* (πλακω, 'I plait or fold,') The cellular structure between the tables of the skull. *Diplopia* (διπλοος, 'double,') and οψις, 'vision,') Double vision.

**ΔΙΑ** (δια) in composition, 'through,' 'asunder,' 'out of,' 'separated.' Hence, *Diabētes* (βαίρω, 'I go.') A morbid discharge of urine. *Diachylon* (χυλος, 'a juice.') A plaster formerly made of vegetable juices. *Diacodium* (διακωδιων, (κωδειων, 'a poppy head,') a medicine made of poppy heads. *Diagnōsis* (γνωσις, 'learning.') Discrimination. *Diapedēsis* (πηδαω, 'I spring.') Transudation; as hemorrhage by diapedesis. *Diaphorēsis* (διαφορησις, (φορεω, 'I convey.') Perspiration. *Diaphragm* (φραγμα, 'an inclosure,') a partition. *Diarrhœa* (εγω, 'I flow.') *Diastolē* (διαστελλω, 'I put asunder.') Dilatation. *Diathēsis* (τιθημι 'to place.') Disposition to disease. *Diurēsis* (ουρεω, 'I pass the urine.') An abundant secretion of urine.

**ΔΙΡΜΗΤΗΡΑ** (διρθερα) 'a skin; leather.' Hence, *Diphtheritis*. Inflammation of a mucous membrane, accompanied by a membraniform exudation.

**ΔΙΡΣΑ** (διψα) 'thirst.' Hence, *Dipsōsis*. Morbid thirst. *Polydipsia* (πολυς, 'much.') Excessive thirst.

**ΔΟΤΗΗΝ** (δοθην) 'a boil.' 'a pustule.' Hence, *Dothi-enteritis* (*Enteritis*. Inflammation of the intestines.) Follicular gastro-enteritis.

**ΔΥΝΑΜΙΣ** (δυναμις, 'strength.') 'The vital power.' Hence, *Dynamometer* (μετρον, 'a measure.') A measurer of strength.

**ΔΥΣ** (δυσ) in composition, 'difficult,' 'faulty;' sometimes privative: mostly, answering to the English particles *dis*, *in*, *mis*, or *un*. Hence, *Dysæsthesiæ* (αισθησις, 'sensation.') Dulness of sensation, or diseases of sensation. *Dyscrasia* (χρασις, 'a mixture.') A faulty mixture of the juices, a cachectic condition. *Dysecoia* (αχοη) 'hearing.' Difficulty of hearing. *Dysentery* (εντερον, 'an intestine.') The bloody flux. *Dysmenorrhœa*, see (**ΜΕΝ**) painful and difficult menstruation. *Dysopsia* (οψις, 'vision.') Defective vision. *Dyspepsia* (πεψις, 'digestion.') Indigestion. *Dysphagia* (φαγω, 'I eat.') Difficulty in swallowing. *Dyspnœa* (πνοη, 'breathing.') Difficulty of breathing. *Dystōcia* (τοκος, 'a parturition.') Difficult labor; and *Dysūria* (ουρεω, 'I pass the urine.') Difficulty in passing the urine.

## E.

**ΕC**,—before a vowel, **ΕX** (εξ, ἐξ) 'out of,' 'from,' 'off.' Hence, *Ecehymōma* (χευω, 'I pour out.') An extravasation of blood. *Ec-*

coprotic (κοπρος, 'excrement.') A cathartic. *Eclampsia* (ελαμψις, 'an emission of light.') A convulsion. Epilepsy: from a sensation of light being an occasional premonitory symptom. *Eclectic* (ελεγω, 'I choose.') As an *eclectic* physician; *eclectic* medicine. *Eclegma* (εχλειγμα) (λειχω, 'I lick.') An electuary. *Ectropium* (ετρεπω, 'I turn.') A turning out,—as of the eyelids. *Eczema* (ζεω, 'I boil.') A hot eruption. *Exæmia* (αιμα, 'blood.') Want of blood. *Exanthēma* (ανθος, 'a flower.') An efflorescence. *Exomphalos* (ομφαλος, 'the navel.') Rupture of the navel. *Exophthalmus* (οφθαλμος, 'the eye.') Projection of the eye out of the orbit. *Exostosis* (οσσειν, 'a bone.') A bony tumor. *Exosmose* (ωσμος, 'impulsion.') Outward impulsion. [DUTROCHET.]

EIDOS (ειδος, 'form,' 'resemblance.') The *ei* is often changed into *ω*, at the termination of words. Thus *Hæmatoïdes* (αιματοειδης) is often written *Hæmatōdes* (αιματοωδης.) The English termination *oid* is from *ειδος*; as *Hæmatoid*, *Phlegmonoid*, &c.

ELYTRON (ελυτρον) 'a sheath.' The vagina. Hence, *Elytritis*. Inflammation of the vagina. *Leucorrhœa*. *Elytrōdes* (ειδος, 'form.') Sheathlike;—as the *tunica vaginalis*, vel *elytrodes*, *testis*. *Elytropōsis* (πτωσις, 'a falling down.') A prolapsus of the vagina.

EX and EM (εν) 'in,' 'into,' 'within;' also, 'excess;' (frequently used in this last sense, by Dr. Good.) A common prefix, answering, generally, to the prefixes *im* and *in*, in English. In composition, before *β*, *π*, *φ*, *ψ*, and *μ*, the *ν* is changed into *μ*; before *γ*, *κ*, *ξ*, and *χ*, into *γ*; before *λ*, into *λ*; and before *ζ*, generally, into *ζ*. Hence, *EMBRYO* (εμβρυον) (βρυω, 'I bud forth.') A fecundated germ. *Embryothlāsis* (θλασις, 'a breaking to pieces.') The destruction of the fœtus in utero. *Embryotomy* (τομη, 'incision.') The anatomy of the embryo; destruction of the fœtus. *Embryulcia* (ελκω, 'I draw.') The forcible removal of the fœtus from the uterus. *Emmēnia* (μην, 'a month.') The menses; and *Emmenagogue* (αγω, 'I expel.') A promoter of the menses. *Emphysēma* (φυσημα or φυσησις, 'inflation.') Infiltration with air. *Empiric* (πειρα, 'experience.') One who makes experiments; also, a quack. *Emplastrum* (πλασσω, 'I smear.') A plaster. *Empresma* (πρησμα, 'a burn,' from *πρηθω*, 'I set on fire.') An internal inflammation. [GOOD.] *Empyēma* (εμπνημα, πνησις, 'suppuration.') Internal suppuration, especially in the chest. *Emprosthotonus* (προσθεν, 'before,' and *τεινω*, 'I extend.') Tetanus, in which the body is bent forwards. *En-*

arthrōsis (αρθρον, 'a joint.') A deep, yet perfect and free joint. *Encephalitis* (κεφαλη, 'head.') Inflammation of the brain. *Encephalocēlē* (κεφαλη, 'head,' and κηλη, 'rupture.') Hernia Cerebri. *Encephalon* or *Encephalos* (εγκεφαλος, 'the brain,') 'the contents of the cranium.' *Endemic* (δημος, 'the people.') A disease of a locality. *Endon* ('within.') Hence, *Endosmose* (ωσμος, 'impulsion.') Inward impulsion. [DUTROCHET.] *Endocardium* (καρδια, 'the heart.') The lining membrane of the heart. *Enēma* (ενεμα.) (ιημι, 'to send.') An injection. *Engastrimythos* (εγγαστριμυθος,) (γαστηρ, 'the belly;' μυθος, 'a discourse.') A ventriloquist. *Entēron* (εντερον) (εντος, 'within') an intestine. Hence, *Enteritis*. Inflammation of the intestine. *Enterocēlē* (κηλη, 'rupture') intestinal rupture. *Enterica* (εντερικα) diseases affecting the intestines; *Enterolithos* (λιθος, 'a stone') a stony concretion in the stomach or intestines. *Dothineritis* (δοθιν, 'a pustule.') Inflammation of the intestinal follicles. *Entozōon* (εν, εντος, 'within;' ζων 'an animal.') An intestinal worm. *Entrōpium* (τρεπω, 'I turn.') A turning in, as of the eye-lashes. *Enurēsis* (ουρεω, 'I make water.') Incontinence of urine, *Errhine* (ριν, 'the nose.') A sternutatory.

ΕΥ', ΕΦΗ, ΕΠΙ (επ', εφ, επι) 'upon,' 'above;' in composition it generally means augmentation, addition, increase, reciprocal action, repetition. Hence, *Epaemē* (ακη, 'the top') increase of a disease, one that is approaching its height. *Ephēbia* (ηβη, 'the pubes or down on the parts of generation') puberty; and *Ephēbus*, a young woman. *Ephelides* (ηλιος, 'the sun') sun freckles. *Ephēmerus* ('ημερα, 'a day') of one day's duration. *Ephialtes* (αλλομαι, 'to jump') nightmare. *Ephidrosis* (ιδρωσις, 'sweating') a profuse sweating. *Ephippium* (ιππος, 'a horse') the sella turcica. *Epidemic* (δημος, 'the people') an atmospheric disease. *Epidermis* (δεγμα, 'the skin') the cuticle. *Epididymis* (διδυμος, 'the testis') a small body, that lies on the testicle. *Epigastrium* (γαστηρ, 'the stomach') the region of the stomach. *Epiglottis* (γλωττα, 'the tongue') *Epilepsy* (λαμβάνω—future, ληψω—'I seize hold of') the falling sickness. *Epiphysis* (φνω, 'I grow') a process, united to the bone by cartilage. *Epiploon* (επιπλοον,) (πλεω, 'I float.') The omentum or caul. Hence *Epilocēlē* (κηλη, 'a rupture.') An omental rupture. *Epispadias* (σπαω, 'I draw, or contract') one whose urethra opens on the dorsum penis. *Epispastic* (the same etymon) 'a drawing' application, as a blister. *Epistaxis* (σταξις, 'dropping')



frequent dropping. Hemorrhage from the nose. *Epistŕopheus* (στρεφω, 'I turn,') the second vertebra of the neck. *Epithem* (τιθημι, 'to put') a cataplasm. *Epŭlis* (ουλον, 'the gum') a gumboil. *Epulotic* (ουλη, 'ciatrization') a cicatrisant.

*EROS* (ερως, 'love.') Hence, *Erotic*; as *Erotic mania* and *Eroto-mania*, love madness.

*ERYSOS* (ερυσος) *ERYTHOS* (ερυθρος) and *ERYTHROS* (ερυθρος) 'red,' 'rose-coloured.' Hence *Erysipēlas*; (πελας, 'near.' (?) ) St. Anthony's fire. *Erythēma*, redness; and *erythrēma*. *Erythrōdes* (ειδος, 'resemblance') as the *tunica erythrodes* of the testis.

*ETHMOS* (ηθμος, 'a sieve.') Hence, *ethmoid* (ειδος, 'resemblance') sieve-like, as the *ethmoid bone*.

*EU* (ευ) 'good,' 'proper,'—when prefixed to words, as *euæmia* (αιμα, 'blood') a good condition of the blood. *Euæsthēsia* (αισθησις, 'feeling') a good state of feeling. *Euehræa* (χρεια or χροα, 'color of the surface') a good colour of the skin. *Euerasia* (χρασις, 'mixture.') The opposite to *dyserasia*. *Eupepsia* (πεψις, 'concoction,') good digestion. *Euthanasia* (θανατος, 'death') an easy death.

*EXIS*, see *HEXIS*.

## F.

*FACIENT* (*faciens*) 'making,' from *facio*, 'I make.' As *calefacient* (*calco*, 'I warm';) a medicine, that causes warmth. *Rubefacient* (*rubeo*, 'I am red') one that causes redness.

*FUGE* (*fugo*, 'I expel') 'an expeller.' Hence, *febrifuge* (*febris*, 'a fever') a fever expeller. *Vermifuge* (*vermis*, 'a worm') a worm expeller.

## G.

*GALA* (γαλα, genitive γαλακτος,) 'milk.' Hence, *Galactophŕorous* (φερω, 'I carry') lactiferous. *Galactopoietic* (ποιεω, 'I make') milk making, milk favoring. *Galactorrhœa* (γειω, 'to flow') a copious flow of milk.

*GASTER* (γαστήρ,) the stomach; the belly. Hence, *Gastralgia* (αλγος, 'pain') stomach-ache, belly-ache. *Gastricism*, the doctrine which refers most complaints to the stomach. *Gastritis*, inflammation of the stomach. *Gastrocnēmius* (κνημη, 'the leg') the belly or calf of the leg; or rather the parts forming it. *Gastrodŭnia* (οδυνη,



‘pain’) pain in the stomach. *Gastrotomy* (τομή, ‘incision’) the operation of opening the belly.

GEN, GENĒSIS (γενεσις) ‘generation.’ Hence, *Hydrogen* (ὕδωρ, ‘water’) a gas, which enters into the formation of water. *Osteogeny* (οστέον, ‘a bone’) the formation of bone.

GENĪON (γενειον) ‘the chin.’ Hence, *Genioglossus* (γλωσση, ‘the tongue’) a muscle, arising from the chin, and passing to the tongue.

GENYS (γενυς) ‘the jaw,’ also, the chin. Hence, *Genyantron* (αντρον, ‘a cavity’) the antrum of Highmore; and *Genyantralgia* (αλγος, ‘pain’) pain in the antrum of Highmore.

GERON (γερων, ‘an old person.’) Hence *Gerocomium* (κομειω, ‘I take care of’) an invalid hospital. An hospital for the aged.

GEUSIS (γευσις) ‘taste.’ Hence, *Geusionōsi*, and *Geustionōsi* (νοσος, ‘a disease.’) Diseases of taste.

GINGLYMUS (γινγλυμος, ‘a hinge.’) A hinge joint. Hence, *Ginghlym-oid* (ειδος, ‘form’) hinge-like.

GLENE (γληνη, ‘a shallow socket.’) Hence, *Glenoid* (ειδος, ‘form;’) as *glenoid fossa*; a shallow articular surface.

GLOSSA (γλωσσα) and GLOTTA (γλωττα) ‘the tongue.’ Hence, *Glossalgia* (αλγος, ‘pain.’) pain in the tongue. *Glossitis*, inflammation of the tongue. *Glossoplēgia* (πληγη, ‘a stroke’) paralysis of the tongue.

GNŌSIS (γνωσις) ‘knowledge.’ Hence, *Diagnōsis* (δια, ‘by’) discrimination of diseases. *Prognōsis* (προ, ‘before’) foreseeing and foretelling the result of disease.

GOMPHOS (γομφος) ‘a peg, or a nail.’ Hence, *Gomphiasis*. Pain in the teeth; especially from the use of acids. Also, looseness of the teeth. *Gomphōsis*, the articulation of the teeth with the jaws.

GONE (γονη) GŌNOS (γονος) ‘the sperm.’ Hence, *Gonorrhœa* (ξεω, ‘I flow’) properly *Blennorrhœa*.

GONY (γονυ) ‘the knee.’ Hence, *Gonyāgra* (αγχα, ‘a seizure’) gout in the knee. *Gonyalgia* (αλγος, ‘pain’) pain in the knee. *Gonyoneus* (ογκος, ‘a tumour’) swelling of the knee.

GYNE (γυνη, genitive γυναικος) ‘a woman.’ Hence, *Gynæcology* (λογος, ‘a description’) a treatise on the nature and diseases of women. *Gynandrus* (ανηρ, ‘a man:’ genitive ανδρος) an hermaphrodite.

## H.

HÆMA (αἷμα, genitive αἵματος) ‘blood.’ Hence, *Hæmadonōsos*

(νόσος, 'a disease') a disease of the bloodvessels. *Hæmadostōsis* (ὀστέον, 'a bone') ossification of the bloodvessels. *Hæmatemēsis* (ἐμέω, 'I vomit') vomiting of blood. *Hæmatīca*, diseases of the sanguineous function. [Good.] *Hæmatōdes* (εἶδος, 'resemblance') bloodlike, as *fungus hæmatodes*. *Hæmatōma*, a bloody tumor. *Hæmatophobia* (φοβός, 'dread') a dread of blood. *Hæmatopoiēsis* (ποιέω, 'I make') and *Hæmatōsis*, sanguification. *Hæmaturēsis* and *Hæmatūria* (οὐξέω, 'I pass urine') bloody urine. *Hæmoptōē*, and *Hæmoptŷsis* (πτύω, 'I spit') spitting of blood. *Hæmorrhage* (ζαγῆ, 'a breaking out') a preternatural flow of blood. *Hæmorrhœa* (ξεύω, 'I flow') hemorrhage. *Hæmorrhoids* (same etymon) piles. *Hæmostatic* (στασις, 'stagnation') a styptic.

HALS (ἅλς, 'salt.') Hence, *Halogenium* (γενναίω, 'I make.') Halogene. The basis of common salt. *Haloid* (εἶδος, 'resemblance.') Like salt.

ΗΑΡΗ (ἄφῃ 'feeling,' 'touch.') *Haphonōsi* (νόσος, 'a disease.') Diseases of touch. *Amblyaphia* (ἀμβλυνς, 'dull.') Obtuseness of feeling.

HELLOS (ἔλκος 'an ulcer.') *Helcōdes* and *Helcoīdes* (εἶδος, 'resemblance,') ulcerous. *Helcōma* (ἐλκωμα) 'an ulcer,' especially of the cornea. *Helcōsis* (ἐλκωσις) 'ulceration.'

HELIOS (ἥλιος) 'the sun.' *Heliasis* (ἡλιασις,) and *Heliōsis* (ἡλιωσις) 'insolation.' Exposure to the sun.

HELMINS (ἐλμινς, genitive ἐλμινθος) 'a worm.' Hence, *Helminthagogue* (αἶω, 'I expel.') A vermifuge. *Helminthia*, and *Helminthiasis*, invagination. A worm disease. *Helminthica*, worm remedies. *Helminthology* (λογία, 'a discourse.') A treatise on worms. *Helminthopyra* (πῦρ, 'fire,' 'fever.') Worm fever.

HELOS (ἔλος, 'a marsh.') Hence, *Helōdes* and *Heloīdes* (εἶδος, 'form,' 'resemblance,') marshy; as *Febris helodes*, marsh fever, and *Helopyra* and *Helopyrētos* (πῦρ, and πῦρετος, 'fever,') having the same signification.

HEMERA (ἡμέρα) 'a day.' Hence, *Hemeralopia* (ὀφθαλμία, 'sight.') Dayvision. Nightblindness.

HEMI (ἡμι, ἡμισυ, 'half,' 'semi.') Hence, *Hemicephālus* (κεφαλή, 'head.') One, who has half a head. *Hemierania* (κρανίον, 'the cranium,') megrim; pain in one half the head. *Hemiopia* (ὀφθαλμία, 'vision.') The sight of only half an object. *Hemipagia* and *Hemipēgia* (παγός, πηγός, 'fastened,' 'nailed.') *Hemierania*, clavus

hysterieus. *Hemitritæus* (τρίταιος, 'tertian;') happening on the third day.

HEPAR (ἥπαρ, genitive, ἥπατος, 'liver.') *Hepatalgia* (αλγος, 'pain.') Pain in the liver. *Heputapostēma* (αποστήμα, 'an abscess.') An abscess of the liver. *Hepatization*. Conversion of the lung into a liverlike substance. *Heputitis*. Inflammation of the liver.

HERMES (Ἑρμης 'Mercury.') Hence, *Hermaphrodite* (Ἀφροδιτη, 'Venus.')

HERNIA (of uncertain etymon.) A rupture. *Herniotomy* (τομή, 'incision.') The operation for hernia.

HĒTEROS (ἑτερος) 'the one of two:' 'the other.' Hence, *Heterophōnia* (φωνή, 'voice.') A cracked or broken voice. *Heterorexia* (ορεξις, 'appetite.') Appetite for all kinds of strange aliments.

HĒXIS (ἥξις) 'habit,' 'constitution.' Hence, *Hectie* fever; a fever of the habit. *Cachexia* (κακος, 'bad.') A bad habit of body.

HIDROS (ἰδρως, genitive ἰδρωτος) 'sweat.' Hence, *Hidrōa*, and *Hidrōta*. A sweat or heat eruption. *Hidropyra* (πυρ, 'a fire or fever.') A sweating fever, *Sudor anglicus*. *Hidrōsis* (ἰδρωσις) 'sweating.' *Hidrotērion* (ἰδροτήριον) 'a sudatorium or sweating place.'

HIMAS (ἱμάς, genitive ἱμαντος) 'the uvula.' Also, elongation of the uvula. *Himantōma* (ἱμαντωμα) and *Himantōsis* (ἱμαντωσης) have the same signification.

HIPPUS (ἵππος) 'a horse.' Hence, *Hippiatrīa* (ιατρος, 'a physician.') The veterinary art. *Hippoeampus* (χαμᾶν, 'a winding.') A medullary projection in the posterior cornu of the lateral ventricle of the brain. *Hippotomy* (τομή, 'incision.') Anatomy or dissection of the horse.

HISTOS (ἱστός) 'texture.' The organic texture. Hence, *Histogenia* (γινומαι, 'to arise.') The formation of the organic textures. *Histology* (λογος, 'a description.') The doctrine of the organic textures; general anatomy. *Anhistous*, (αν, 'privative,') without organization, as the 'anhistous' membrane, or decidua. [VELPEAU.]

HOMŌIOS (ὁμοιος) 'like.' Hence, *Homœopathia* (παθος, 'disease.') The doctrine of Hahnemann—*similia similibus curantur*.

HYALOS (ὑαλος) 'glass.' Hence, *Hyalōdes* and *Hyalōides*, (εἶδος, 'resemblance.') Glasslike, as the hyaloid coat of the eye.

HYDOR (ὕδωρ, genitive ὕδατος) 'water.' Hence, *Hydatid*, a bladder of water, an accephalocyst. *Hydēros* (ὕδερος) 'dropsy, especially

anarsarca. *Hydragogue* (αγω, 'I expel.') A cathartic that occasions watery evacuations. *Hydrargyria*, and *Hydrargyr̄iasis* (αργυρος, 'silver.') The mercurial disease. *Hydrargyrum*, quicksilver. *Hydrarthrus* (αρθρον, 'a joint.') Dropsy of a joint. *Hydrencephalus* (εγκεφαλός, 'the brain.') Dropsy of the brain. *Hydroarion* (ωαριον, 'the ovarium.') Dropsy of the ovarium. *Hydrocardia* (καρδία, 'the heart.') Dropsy of the pericardium. *Hydrocēlē* (χηλή, 'a tumor.') Dropsy of the tunica vaginalis. *Hydrocephalus* (κεφαλή, 'head.') Dropsy of the head. *Hydrogenium* (γενναω, 'I form.') The gas hydrogen. *Hydromētra* (μητρα, 'the womb.') Dropsy of the womb. *Hydropericardium*. Dropsy of the pericardium. *Hydrophobia* (φοβός, 'dread.') Hydrops (ἰδρωψ) 'dropsy.' *Hydorrhachitis* (ραχίς, 'the spine.') Dropsy of the spine. *Hydrothōrax*. Dropsy of the chest.

HYGROS (ὑγρός) 'moist,' 'wet.' Hence, *Hygrōma*, a watery swelling. *Hygrophobia*, *Hydrophobia*.

HYŌDES (ἰωδής) *Hyoïdes* (ιοειδής) (from the letter υ, and εἶδος, 'resemblance.') *Hyoïdeus*; as *os hyoïdeum*, the hyoid bone. Hence, *Hyodeoglossus*, *Hyoglossus* (γλωσσα, 'the tongue.') A muscle arising from the hyoid bone, and passing to the tongue.

HYPER (ὑπερ) 'above,' 'in excess.' Hence, *Hyperæmia* (αἷμα, 'blood.') 'Turgescence of the capillary vessels. *Hyperæsthēsis* (αισθησις, 'feeling.') Excessive sensibility. *Hyperaphia* (ἅψη, 'touch.') Excessive acuteness of touch. *Hypercatharsis*, superpurgation. *Hyperdynamia* (δυναμῖς, 'force;') excessive strength. *Hyperemēsis*. Excessive vomiting. *Hyperencephalous* (εγκεφαλόν, 'the brain.') A fœtus, having a kind of encephalocele, the brain being upon the cranium. *Hypercrethisia* (ερεθίζω, 'I excite.') Excessive irritability. *Hyperidrōsis* (ἰδρωσις, 'sweating.') Excessive sweating. *Hyperosphrēsia* (οσφρησις, 'smell.') Excessive acuteness of smell. *Hypersarcōma* (σαρκωμα, 'growth of flesh.') Luxuriant flesh. *Hypersthēnia* (σθενος, 'strength.') Excessive vital power. *Hypertrōphy* (τροφή, 'nutrition.') Supernutrition.

HYPNOS (ἵπνος) 'sleep.' Hence, *Hypnotic*, (ἵπνωτικός) 'a soporific.'

HYPO (ὑπο) 'under.' Hence, *Hypæcticus* (ὑπακτικός) (αγω, 'I expel.') A cathartic. *Hypamaurōsis*, an imperfect amaurosis. *Hypæmia* or *Hypoæmia* (αἷμα, 'blood.') A deficiency of blood; also, extravasation of blood. *Hypochondria* (χονδρός, 'a cartilage.') The regions under the cartilages of the false ribs. *Hypochondriasis*. The disease of the hypochondres. *Hypochŷma* and *Hypochŷsis*



(χυνω or χεω, 'I pour out.') A suffusion. A cataract. *Hypogastrium* (γαστήρ, 'the belly.') The lowest portion of the belly. *Hypoglossal* (γλωσσα, 'the tongue.') Lying under the tongue. The ninth pair of nerves. *Hypospadias* (σπaw, 'I draw.') The opposite to Epispadias: the urethra terminating beneath the male organ. *Hypotheton* (θεσις, 'the act of placing.') A suppository.

**HYSTĒRA** (ὑστέρα, ὑσπερη) 'the uterus.' Hence, *Hysteria*, a disease often referred to the uterus. *Hysteritis*, inflammation of the uterus. *Hysteropsophia* (ψοφεω, 'I emit a sound') discharge of wind from the uterus. *Hysteroptōsis* (πτωσις, 'a falling down') prolapsus uteri. *Hystercotomy* (τομή, 'incision') the cæsarean section: also, *Hystero-rotomotocia* (τοκος, 'parturition').

## I.

**IATROS** (ιατρος, 'a physician'.) Hence, *Iatraliptic* (ιατραλειπτική) (αλειφω, 'I anoint') the art of applying by friction. *Iatrochemia*, medical chemistry. *Iatromathematicus*. A mathematical physician. *Iatrotechnica* (τεχνη, 'art') the healing art.

**ICHTHIUS** (ιχθυς) 'a fish.' Hence, *Ichthyophagus* (φαγω, 'I eat') a fish eater. *Ichthyōsis*. Fish skin,—a cutaneous disease. *Ichthyocolla* (κολλα, 'glue') fish glue. Isinglass.

**IDIOS** (ιδιος,) 'proper,' 'peculiar.' Hence, *Idiopathic* (παθος, 'affection') primary suffering, in contradistinction to symptomatic. *Idiosyncrasy*, and *Idiosyncrasy* (συνχρασις, 'commixture;' συγχρισις, 'composition') peculiarity of constitution.

**IDROS**, See **HIDROS**.

**ILĒON, ILĪUM** (from ειλω, 'I roll') the gut *Ileum*: also, the bone of the pelvis on which the Ileum rests. *Ilcus*; *volvulus*,—a variety of colic,—the *Colica Ilcus*. *Iliac*; referable to the Ilium; as *Iliac* passion; *Iliac* muscle.

**IMAS**, See **HIMAS**.

**ION** (ιον) 'the violet.' Hence, *Ionthus*, 'violet eruption;' some, however, derive it from ανθος, 'a flower;' others from ονθος, 'foulness') an eruption on the face.

**IRIS** (ιρις, genitive ιριδος) a rainbow. The Iris or diaphragm of the eye. *Iriancistron* and *Iridancistron* (αγκιστρον, 'a hook') an instrument used in the formation of artificial pupil. *Iridectomia* (εκτομή, 'excision') formation of an artificial pupil: also, *Iridotomy* (τομή, 'incision.') *Irītis*. Inflammation of the Iris.

**ISCHIO** (ισχω, 'I keep back,' 'I restrain,' 'I hold firm.' Hence,



*Ischæmia* (ἰσμία, 'blood') suppression of hemorrhage. *Ischion* (ισχίον) the ischium. The hip. Seat bone. *Ischias*, pain in the hip. *Ischiadic*, and *Ischiatic*, Seiatic. *Ischialgia* (αλγος, 'pain') the same as *Isehias*. *Ischoloehia* (λοχία, 'the loehia') suppression of the lochia. *Ischomēnia* (μην, 'a month') suppression of the menses. *Ischūria* (ουρον, 'urine') suppression of urine.

## L.

*LAGOS* (λαγος) 'a hare.' Hence, *Lagochilus* (χειλος, 'a lip') and *Lagostōma* (στομα, 'mouth') harelip.

*LAMBDA* (the Greek letter Λ, λαμβδα.) Hence, *Lambdæisnius*. The frequent use of the L. for the R. *Lambdoidal*, *Lambdōdes*, *Lamdoïdes* (ειδος, 'form') shaped like the letter Λ.—As the *Sutura lambdoïdalis*.

*LARYNX* (λαρυγξ). The upper part of the windpipe. Hence, *Laryngēal*, belonging to the larynx. *Laryngitis*, inflammation of the larynx. *Laryngotomy* (τομή, 'incision') cutting into the larynx.

*LEIPO*, See *LIPO*.

*LEPIS* (λεπς, genitive λεπιδος,) *LEPAS* (λεπας, genitive λεπαδος), 'a scale.' Hence, *Lepidōdes* and *Lepidoides* (ειδος, 'form') Squamous, sealy; as the *Sutura lepidodes vel squamosa*.

*LEPSIS* (ληψς) 'a taking hold of,' from λαμβανω, 'I take.' Hence, *Epilepsy* (επι, 'upon') 'a seizing upon.' *Analepsis* (ανα, 'again') a recovery.

*LEPTOS* (λεπτος), 'thin,' 'light.' Hence, *Leptophōnia* (φωνη, 'voice') a fine, delicate voice. *Leptotrophia* (τροφη, 'nourishment') light nutrition. *Leptysmus* (λεπτυσμος) emaciation: wasting.

*LETHŒ* (ληθη) 'oblivion, death.' Hence, *Lethargy* (εργον, 'work.') Stupor, morbid drowsiness. *Lethiferous* (φερω, 'I bear') death bearing. Deadly.

*LEUCOS* (λευκος), 'white.' Hence, *Lcuæthiops* (αιθιοψ, 'an Æthiopian:' itself from αιθω, 'to burn,' and ωψ 'the face') an Albino. *Leucōma* (λευκωμα) 'a whiteness of the cornea: also, Albumen. *Leucophlegmatia* (φλεγμα, 'phlegm,) a dropsical condition. *Lcuorrhœa* (ρεω, 'I flow') *Fluor albus*.

*LIEN* (λειος, 'smooth, slippery,' [?]. The spleen. *Lientery* (εντερων, 'intestine') a watery diarrhœa, with undigested food;—formerly, called 'slipperiness of the guts.'

*LIMOS* (λιμος) 'hunger.' Hence, *Limanehia*, (αγκω, 'I choke') and

*Limoctonia* (κτονος, 'murder,' 'death') death from hunger. *Limōsis*, appetite for food impaired, excessive, or depraved. (Good).

*LIPA* (λιπα,) 'fat,' and *LIPAROS* (λιπαρος,) 'fatty.' *Liparia*, fatness. *Lipōma*, a fatty tumour.

*LIPO* or *LEIPO* (λειπω) 'to leave,' 'to forsake.' Hence, *Lipopsychia* (ψυχη, 'the mind,') fainting; and, also, *Lipothymia* (θυμος, 'the soul or mind').

*LITHIOS* (λιθος) 'a stone.' Hence, *Lithagogues* (αγω, 'I expel') remedies for the stone. *Litharge* (λιθαργυρος) (αργυρος, 'silver'). The semivitreous oxide of lead. *Lithiasis*. A calculous disease. *Lithōdes*, *Lithoides* (ειδος, 'form') stonelike;—as *Os lithōdes*: the petrous portion of the temporal bone. *Lithonthryptic* (θρυπτω, 'I break to pieces') a solvent of stone. *Lithothrpsy* or *Lithotripsy* (θρυψις, or τριψις, 'a breaking,' crushing, or rubbing to pieces.') The art of breaking, or rubbing to pieces, stone in the bladder. *Lithotomy* (τομη, 'an incision') the operation for the stone. *Lithotrixy* (τριβω, 'I break') an operation for breaking the stone in the bladder.

*LOCNOS* (λοχος) a woman in childbed. Hence, *Lochia*; the discharge from a childbed woman. *Lochodochium* (δεχομαι, 'to receive') a lying-in hospital.

*LÆMUS*, *LOIMOS* (λοιμος) 'plague.' Hence, *Læmology* (λογος, 'a discourse') the doctrine of contagious diseases. *Læmopyra* (πυρ, 'fever') the plague.

*LOGY* (λογος, 'a description') a suffix denoting 'a treatise or description.' Hence, *Angiology* (αγγειον, 'a vessel') 'a description of the vessels.' *Neurology* (νευρον, 'a nerve') a description of the nerves. *Nosology* (νοσος, 'a disease') a description or arrangement of diseases.

*LORDOS* (λορδος) 'bent, bent forwards.' Hence, *Lordōma* and *Lordōsis*. A curvature of the spine forwards.

*LYCOS* (λυκος) 'a wolf.' Hence, *Lycanehē* (αγχω, 'I choke') hydrophobia. *Lycorexia* (ορεξις, 'appetite') a canine appetite.

*LYMPHA*, 'Lymph.' *Lymphangēitis* (αγγειον, 'a vessel') inflammation of the lymphatics. *Lymphangēon*, a lymphatic. *Lymphāngiology* (λογος, 'a discourse') a treatise on the lymphatics.

*LYSIS* (λυσις) 'a solution,' from λυω, 'I loosen.' Hence, *Paralysis* (παρα, 'throughout') a palsy. *Dialysis* (δια, 'through') a solution of continuity.

*LYSSA* (λυσσα, λυττα) 'madness,' canine madness. *Lyssodectos* (δηξις, 'a bite') one bitten by a mad dog.

M.

MACROS (μακρος) 'extended;' 'long.' Hence, *Macrauchen* (αυχην, 'neck') a long neck. *Maerobiōsis* (βιος, 'life') a long life. *Macronosia* (νοσος, 'disease') a chronic disease. *Macropnoos* (πνοη, 'breath') long-winded.

MALXOS (μαλακος) 'soft.' Hence, *Mulucosteon* (οστέον 'a bone') *Mollities ossium*.

MANIA (μανια) 'madness.' Hence, *Dæmonomania* (δαιμων, 'a spirit') religious mania. *Monomania* (μονος, 'alone') madness on one subject.

MANTĪA, MANTICA, MANTICE (μαντεια, μαντικη,—in English, 'maney') a common termination to words signifying 'divination.' As *Chiromancy* (χειρ, 'the hand') divination by the hand. *Oneiromancy* (ονειρος, 'a dream') divination from dreams. *Necromancy* (νεκρος, 'dead') divination through the dead.

MASESIS (μασησις) MASSEMA, and MASSESIS, 'mastication.' Hence, *Massēter*, a muscle of mastication.

MASTUS (μαστος, μασθος) 'the mamma.' Hence, *Mastalgia* (αλγος, 'pain') pain in the mamma. *Mastitis*, inflammation of the mamma. *Mastiearcinōma* (χαρκινωμα, 'cancer') cancer of the mamma. *Mastoides*, *Mastoides* (ειδος, 'form') mastoid; as the *mastoid* or *mamillary* process of the temporal bone. *Mastodynia* (οδυνη, 'pain') pain in the mamma. *Mastheleōsis* (έλκος, 'ulcer') suppuration of the mamma.

MECON (μηκων, genitive μηκωος) 'the poppy,' poppy-head. Hence, *Mecōnium*, poppy-juice. Also, the first excrement of the infant, which is dark coloured, like poppy-juice.

MEGAS (μεγας, feminine μεγαλη) 'great.' As *Megalocœlia* (χοιλια, 'the intestines') the great intestines. *Megalophōnia* (φωνη, 'the voice') a full, strong voice.

MELAS (μελας, feminine μελαινα; genitive μελανος) 'black.' Hence, *Melæna*, the black disease. A black discharge from the bowels. *Melancholy* (χολη, 'bile') black bile; *Atrabilis*. *Melanōsis*, a black degeneration or growth.

MELE (μηλη) 'a probe,' 'a sound.' A suffix to the names of certain surgical instruments. *Melōsis*, the act of sounding or probing.

MELI (μελι) MEL, 'honey.' *Melieēris* (κηρος, 'wax') a tumor,

having contents like honey. *Melicraton* (κρασις, 'mixture') a drink of honey and water.

**MEN** (μην, genitive μηνος) *Mensis*. A month. Hence, *Menagogue* (αγω, 'I expel') an emmenagogue. *Menorrhagia* (ραγη, 'a violent flow') immoderate flow of the menses. *Menostāsis* (στασις, 'stagnation') retention of the menses.

**MENINX** (μηνιγξ, genitive μηνιγγος, 'a skin or membrane;' especially a membrane of the brain). Hence, *Meninges* (μηνιγγες, plural of μηνιγξ) the membranes of the brain. *Meningea*, belonging to the membranes of the brain. *Meningion* (μηνιγγιον) a very delicate membrane, and especially the *Tunica Arachnoides* of the brain. *Meningitis*, inflammation of the membranes of the brain.

**MĒROS** (μερος) 'a part,' 'a member.' Hence, *Meramaurōsis*, incomplete amaurosis. *Meridrōsis* (ιδρωσις, 'sweating') a partial sweat. *Merobalneum* (balneum, βαλανειον, 'a bath') a partial bath.

*Mēros* (μηρος) also means 'the thigh.' Hence, *Meroecēlē* (κηλη, 'rupture') Femoral hernia.

**MERYCISMUS** (μηνυσις) rumination. Hence, *Merycology* (λογος, 'a description') the doctrine, or description of rumination.

**MESOS** (μεσος) 'middle, in the midst of.' Hence, *Mesaræum* (ραιος, 'rare' 'thin'), *Mesenterium* (εντερον, 'an intestine') the mesentery; *Mesocōlon* (κωλον), and *Mesorectum*. *Mesoseēlon*, (σκελος, 'the leg') the perinæum.

**META** (μετα) **METH** (μεθ') 'with, together with, after, change of form and place.' Hence, *Metacarpus* (μετα, 'after, behind;' and καρπος, 'the wrist'). *Metamorphōsis* (μορφη, 'shape') change of shape. *Metastāsis* (στασις, 'position') a change of position. *Metatarsus* (ταρσος, 'the middle foot, the instep'). The part beyond the tarsus—between it and the toes. *Methemerina* (ἡμερα, 'a day') daily; as *Febris Methemerina*; a quotidian. *Methōdus* (οδος, 'way') way, mode. *Metōpon* (ωψ, 'the eye') the forehead; and *Metopantron* (ωψ, 'the eye,' αντρον, 'a cavity') the frontal sinus. *Metopantritis*; inflammation of the frontal sinuses.

**METER** (μετρον, 'a measure') a suffix denoting a measurer. Hence, *Baromēter* (βαρος, 'weight') an instrument for measuring the weight of the air. *Pleximēter* (πληξις, 'percussion') an instrument for measuring sound on percussion.

**METRA** (μητρα) *Matrix*, 'the womb.' Hence, *Metrhelcōsis* and *Metrelcōsis* (ελκος, 'ulcer') ulceration of the uterus. *Metritis*, in-



inflammation of the uterus. *Metrocarcinōma* (καρκινῶμα, 'cancer') cancer of the womb. *Metromania*, furor uterinus. *Metroptōsis* (πτῶσις, 'a falling down') prolapsus uteri. *Metrorrhagia* (ῥαγή, 'a violent flow') uterine hemorrhage. *Metrorrhœa* (ῥεῖω, 'I flow') a morbid discharge from the uterus. *Metrotomy* (τομή, 'incision.') The Cæsarean section.

*MICROS* (μικρός) 'small.' Hence, *Microcephālus* (κεφαλῆ, 'head') one who has a small head. *Microphōnia* (φωνή, 'voice') a small voice. *Microorchis* (ορχίς, 'a testicle') one who has very small testicles.

*MONOS* (μονός) 'one, alone, only one.' Hence, *Monomania*, insanity on one subject. *Monopagia* (παγός, 'fixed') fixed in one place; Hemierania. *Monophthalmus* (οφθαλμός, 'the eye') having one eye. *Monorchis* (ορχίς, 'a testicle') having one testicle.

*MORIA* (μωρία) 'folly.' *Morocomium* (χομεῖω, 'I take care of') a mad house; also, *Morodochium* (δεχομαι 'to receive').

*MORION* (μορίον) 'a part.' Hence, *Morioplasticē* (πλαστικός, 'forming') *Chirurgia curtorum*. The restitution of lost parts.

*MORPHE* (μορφή) 'shape' 'form'. Hence, *Morphotomy* (τομή, 'incision') general anatomy.

*MYCTER* (μυκτηρ) 'the nose.' The nasal fossæ. *Mycterophōnia* (φωνή, 'voice') a nasal voice.

*MYELOS* (μυελός) 'the marrow;' especially the spinal marrow. Hence, *Myelitis*, inflammation of the spinal marrow. *Myelophthīsis* *Tabes dorsalis*.

*MYIA* (μύια) *musca*, 'a fly.' Hence, *Myiodesopsia*, and *Myodesopsia* (ὄψις, 'vision.') *Musæ volitantes*: appearances of flies before the eyes.

*MYLE* (μύλη) *mola*, 'a mill,' 'a mole.' The jaw. In composition—as in the names of the muscles, *Mylohyoideus*, *Mylopharyngeus*, &c.—it signifies the jaw.

*MYX* (μύξ) 'a mouse,' *mus*; also, a muscle, *musculus*. Hence, *Myasthenia* (α, privative, and σθενός, 'strength.') Debility of the muscles. *Myenergĩa*, (εν, and εργον, 'work.') Muscular strength. *Myitis*. Inflammation of the muscles. *Myology* (λογός, 'a description.') A treatise on the muscles. *Myopia* (ὄψις, 'vision;') mouse-eye. Shortsightedness; also *Myōsis*.

## N.

NARCA, NARCE (ναρκα, ναρπη,) 'stupor.' Hence, *Narcōsis*; the effect of a narcotic: stupefaction: *Narcotism*: the narcotic condition.

NAUSEA (ναυσια, ναυτια) 'sickness at the stomach;' properly seasickness; from ναυς, 'a ship.' Hence, *Nauseous* and *Nautiōdes*, (ναυτιωδης) 'exciting nausea.'

NECROS (νεκρος) 'death.' Hence, *Necrology* (λογος, 'a discourse.') An obituary; a description of death. *Necromancy* (μαντεια, 'divination.') Divination by the dead. *Necrōsis*,—death,—as of a bone. *Necropsy* (οψις, 'sight,') and *Necrotomy* (τομη, 'incision.') Dissection; examination after death.

NEOS (νεος) *novus*, 'new,' 'fresh.' Hence, *Neogāla* (γαλα, 'milk.') The first milk or colostrum. *Neognos* (νεογνωσ) (γενω, 'I beget.') A new-born infant.

NEPHIOS (νεφος,) *nubes*, 'a cloud.' Hence, *Nephēla*, *Nephēlē* (νεφελη,) and *Nephelium* (νεφελιον) 'a little cloud;' Nubecula; a speck on the cornea. *Nephelōdes* (νεφελωδης) *Nubilosus*, cloudy.

NEPHROS, (νεφρος) *ren*, 'a kidney.' Hence, *Nephralgia* (αλγος, 'pain.') Pain of the kidney. *Nephritis*, inflammation of the kidney. *Nephrolithiasis* (λιθος, 'a stone.') The disease of renal calculus. *Nephroncus* (ογκος, 'a tumor.') A swelling of the kidney.

NEURON (νευρον, *nervus*,) 'a nerve.' Hence, *Neuralgia* (αλγος, 'pain.') Nerveache. *Neurilēma*, or *Neurilȳma* (ειλνω, 'I envelope.') The sheath of a nerve. *Neuritis*, inflammation of a nerve. *Neurōdes* (ειδος, 'like.') *Nervosus*, nervous. *Neurology* (λογος, 'a discourse.') A description of the nerves. *Neuronōsos* (νοσος, 'a disease.') A disease of the nerves. *Neuropathic* (παθος, 'affection.') Belonging to disease of the nerves.

NOSOS (νοσος) 'a disease.' Hence, *Nosocomium* (κομεω, 'I take care of.') An hospital; and *Nosodochium* (δεχω, 'I receive.') *Nosology* (λογος, 'a description.') The doctrine of disease; generally, the classification of diseases.

NOSTOS (νοστος) 'a journey home.' Hence, *Nostalgia* (αλγος, 'pain,') and *Nostomania*, homeache.

NOTOS (νωτος) 'the back.' Hence, *Notalgia* (αλγος, 'pain.')

Pain in the back. *Notencephalous* (εγκαφαλόν, 'the brain.') A fœtus having the head with the brain on the back.

*Nux* (νυξ, genitive νυκτος) 'night.' Hence, *Nyctalopia* (ωψ, 'the sight.') Nightsight; dayblindness. *Nyctobatēsis* (βαινω, 'I go,' 'I wander.') Somnambulism.

*Nymphæ* (νυμφα, νυμφη, 'a bride.') The lesser labia of the female parts of generation. *Nymphomania*, *Furor uterinus*. *Nymphotomy* (τομη, 'an incision.') The removal of the nymphæ.

## O.

*Oarion* (ωριον) (ωορ, 'an egg.') The ovarium; also, called *Oophoron* (φερω, 'I carry.') The egg vessel. Hence, *Oaritis*, inflammation of the ovarium.

*Odous* (οδους, genitive οδοντος) 'a tooth.' Hence, *Odontagōgum* (αγω, 'I expel,') and *Odontagra* (αγρα, 'a seizure.') An instrument for extracting teeth. *Odontalgia* (αλγος, 'pain;') toothache. *Odontiasis*, dentition, and painful dentition. *Odontia*, pain or derangement of the teeth or their sockets. [GOOD.]

*ODYNE* (οδυνη) 'pain.' A very common suffix; as in *Anodyne*, *Pleurodyne*, &c.

*ŒDEMA* (οιδημα) from οιδω, 'I swell.' A swelling;—especially a watery swelling. Hence, *Œdematous*,—of the nature of œdema; and *Œdematoid* (ειδος, 'resemblance.') Resembling œdema.

*ŒXUS* (οινος) 'wine.' Hence, *Œnomania*, delirium tremens.

*ŒSOPHAGUS* (οισοφαγος,—from οιω, 'I carry;,' and φαγω, 'I eat.') The gullet. Hence, *Œsophagitis*, inflammation of the œsophagus. *Œsophagotomy* (τομη, 'incision.') An incision into the œsophagus.

*ŒSTRUS* (οιστρος) 'a violent impulse or desire.' Hence, *Œstrus venereus*, and *Œstromania*, nymphomania.

*OID* and *ODE*, (see *EIDOS*.)

*OLENE* (ωλενη), *ulna*, 'the elbow.' Hence, *Olecranon* or *Olecranon* (κρανον, 'the head.') The head of the elbow:—the *Acrolenion*. (See *ACROS*.)

*OLIGOS* (ολιγος), 'few,' 'little.' Hence, *Oligæmia* (αιμα, 'blood.') Paucity of blood. *Oligotrophia* (τροφη, 'nourishment.') Defective nutrition.

*OMOS* (ωμος) 'the shoulder.' Hence, *Omagra* (αγρα, 'a seizure.') Pain or gout in the shoulder.

OMPHALUS (ομφαλος) 'the navel.' The *Umbilicus*. Hence, *Omphalelcōsis* (έλκος, 'ulcer.') Ulceration of the navel. *Omphalitis*, inflammation of the navel. *Omphalocēlē* (κηλη, 'rupture.') Umbilical hernia.

ONCOS, ONCUS (ογκος) 'a tumor.' *Oncōses*; tumors, as diseases. *Oncotomy* (τομη, 'incision.') The opening of an abscess, or removal of a tumor.

ONEIROS (ονειρος) 'a dream.' Hence, *Oneirodynia* (οδυνη, 'pain.') A painful dreaming. *Oneirogmus*, (ονειρωγμος) 'a lively dream.' Nocturnal pollution.

ONYX (ονυξ, genitive ονυχος, 'a nail.') Hence, *Onychoptōsis* (πτωσις, 'a falling off.') Loss of a nail.

OPHTHALMOS (οφθαλμος) 'the eye.' Hence, *Ophthalmia*, and *Ophthalmitis*, inflammation of the eye. *Ophthalmiater* (ιατρος, 'a physician.') An oculist. *Ophthalmocarcinōma* (καρκινωμα, 'cancer.') Cancer of the eye.

OPISTHE (οπισθε) 'from behind,' 'backwards.' Hence, *Opisthoccephalon* (κεφαλη, 'head') the back part of the head. *Opisthotōnos* (τεινω, 'I extend'). *Tctonus dorsalis vel posticus*.

OPS (ωψ) 'the eye, the look.' Hence, *Opsis* (οψις, 'sight,' 'vision', and *Opsionūsi* (νονσοι, 'diseases') diseases of vision. *Amblyopia* (αμβλυσ, 'dull.') Dulness of vision. *Autopsy* (αυτος, 'himself') self-inspection. *Diplopia* (διπλοος, 'double') Double vision. *Cyclopia*, (κυκλος, 'a circle') the state of having one eye; and *Monopsia* (μονος, 'one') having the same signification.

ORCHIS (ορχις, genitive ορχεως, and ορχιδος) 'the testicle.' Hence, *Orchcotomy* (τομη, 'incision') and *Orchidotomy*. Castration. *Orchitis*. Inflammation of the testicle.

ORCHOS (ορχος) 'a row:' as of the eyelashes. The tarsus. *Orchotomy* (τομη, 'incision') the removal of the tarsus.

OREXIS (ορεξις) 'appetite.' Hence, *Anorexia* (α or αν, 'privative') want of appetite.

ORTHOS (ορθος) 'right,' 'upright.' Hence, *Orthopædia* (παις, genitive παιδος, 'a child') the art of correcting, or preventing deformities in the young. *Orthopnœa* (πνοη, 'breathing') dyspnœa, requiring the patient to be erect.

OSCHE (οσχη) 'the scrotum.' Hence, *Oschitis*. Inflammation of the scrotum. *Oschocarcinōma* (καρκινωμα, 'cancer') *cancer scroti*.

OSME (οσμη, 'an odour,' from οἶω, 'I smell'). *Ozæna*, (οζαινα) a



fetid ulcer of the nose, is from the same root. *Osmonōsi* (νοσος, 'a disease') diseases of the sense of smell.

*Osmos* (ωσμος, 'a pushing'). Hence, *Endosmose* (ενδον, 'within') an inward impulsion. *Exosmose* (εξ, 'out'). An outward impulsion.

*OSPIRASIA* (οσφρασια) 'an odour.' *Osphrēsis*, (οσφρησις) 'the sense of smell.' Hence, *Osphresiology*, (λογος, 'a discourse') a treatise on, or description of, odours.

*OSPIYS* (οσφυς) *Coxa*. 'The hip.' Hence, *Osphyalgia* (αλγος, 'pain') coxalgia. Pain in the hip. *Osphyitis*, inflammation of the parts about the hip.

*OSTEON* (οστέον) 'a bone.' Hence, *Ostarion*, a little bone. *Osteocōpus* (χοπος, 'fatigue,' 'pain') pain or fatigue in a bone: also, *Ostealgia* (αλγος, 'pain') and *Osteodynia* (οδυνη, 'pain'). *Osteology* (λογος, 'a discourse.') A description of the bones. *Osteomalacia* (μαλακος, 'soft') softness of bones. *Osteonōsi* (νοσος, 'a disease') diseases of bone. *Osteosarcōma* (σαρξ, 'flesh') a kind of fleshy swelling of bone. *Osteōsis* and *Ostōsis*; a bony tumor; ossification. *Osteosteātōma* (στεατωμα, 'a fatty tumor;') a kind of suety tumor of bone.

*ΟΤΑ* (ωτα) 'the ears.' Hence, *Otāgra* (αγρα, 'seizure') an ear pick. *Otalgia* (αλγος, 'pain') earache. *Otenchētes* (εγχυνω, from εν, and χυνω, 'I pour') an ear syringe. *Otica*. Remedies for the ear. *Otitis*. Inflammation of the ear. *Otorrhœa* (ρεω, 'I flow.') A discharge from the ear.

*Oxys* (οξυς) 'acute, sharp, sour.' *Oxos* (οξος,) 'vinegar.' *Oxide*. A diminutive of *oxos*. *Oxyeratum* (κρασις, 'a mixture') a mixture of vinegar, honey, and water. *Oxyecoia* (οξυηχοια) (ακοη, 'audition,) too great acuteness of hearing. *Oxygāla* (γαλα, 'milk') sour milk. *Oxygen* (γενω, 'I make') the oxidizing gas. *Oxymel* (μελι, 'honey') a mixture of vinegar and honey. *Oxynōsos*, *Oxynōsēma* (νοσος, 'a disease') an acute disease. *Oxyopia* (ωψ, 'vision') acuteness of vision. *Oxyosphrēsia* (οσφρησις, 'smell') acuteness of the sense of smell. *Oxyphlegmasia* (φλεγμασια, 'inflammation.') Acute inflammation. *Oxyregmia* (εξευγομαι, 'to belch.') An acid eructation.

## P.

*PACHYS* (παχυς) 'thick,' 'fat,' 'fleshy.' Hence, *Pachæmia*, and *Pachyæmia* (αίμα, 'blood.') Too great thickness of the blood.

*PAIS* (παις, genitive παιδος) 'a boy,' 'a child.' Hence, *Pæda-*

trōphia (α, privative, and τροφή, 'nourishment.') Atrophy of children.

PALIN (παλιν) 'again.' Hence, *Palindromia* (δξρομος, 'a race,' 'a course.') A relapse.

PALMOS, PALMUS (παλμος) 'palpitation.' *Palmic*, belonging to palpitation.

PAN (πας, πασα, παν, genitive παντος) 'all.' *Panplēgia* or *Pamplēgia* (πληγη, 'a stroke.') General palsy. *Panelymnagogue* (χυνμος, 'a juice,' αγω, 'I expel.') A cathartic, which evacuates every thing. *Pancrēas* (ξεφας, 'flesh,') 'all flesh.' The sweetbread. *Pancreatitis*, inflammation of the pancreas. *Pantagogue* (αγω, 'I expel;') a panchymagogue. *Pantophobia* (φοβος) 'a universal dread.'

PARA (παρα) 'by, near, contrary to, through, (*per*); above, and beyond, (*ultra*); besides, (*præter*.)' Hence, *Paraentēsis* (παξαῖτητησις) (κεντεω, 'I stiek.') A perforation of the abdomen, in ascites. *Paracmē* (αμη, 'the top.') The stage of declension, after a disease has attained the height. Hence, also, *Paracmastic*. *Paralŷsis* (λυω, 'I loosen;') palsy. *Paraphimōsis* (φιμοω, 'I constrict,' 'I bind tight.') A constriction of the prepuce behind the glans. *Paraplēgia*, and *Paraplexia* (παξαπληξια,) (πληγη, 'a stroke.') Paralysis of a part,—usually of the lower part,—of the body. *Paratōpia* (τοπωος, 'a place.') A dislocation. *Paregorie* (παρηγορεω, 'I soothe.') A soothing remedy. *Parenchŷma* (εγχυμα, 'an infusion;' εν, 'in,' and χυν, 'I pour.') The substance of a tissue, which is cellular or interstitial. *Parēsis*, (ιημι, 'to send;') paralysis. *Paristhmītis* (ισθμος, 'a passage through,' the fauces.) Inflammation of the tonsils. *Paronychia* (ονυξ, 'a nail;') whitlow. *Parotid* (ους, ωτος, 'the ear;') near the ear. *Parūlis* (ουλον, 'the gum;') gumboil.

In the terms *Paracusis* (ακουσις, 'the act of hearing,') morbid hearing, *Parapsis* (αψις, 'touch,') morbid touch, *Parabysma* (βυσμα, 'a stopping up,') morbid engorgement, *Parosmis*, (οσμη, 'smell,') morbid smell, *Paruria* (ουρεω, 'I pass the urine,') morbid micturition, &c. &c.—used by Dr. Goop—*Para* means a defective or morbid condition.

PATHOS (παθος) 'a disease.' Hence, *Pathēma*, (παθημα) and *Pathematology* or *Pathology* (λογος, 'a discourse.') The doctrine, or description, of disease. *Pathognomonie* (γνωσις, 'discernment,') characteristic of a disease. *Idiopathic* (ιδιος, 'peculiar.') Primary, as opposed to symptomatic.

PELLA (πελλα) *Pellis*, 'the skin.' Hence, *Pellāgra* (αγχα, 'a seizure.') A cutaneous disease of Italy.

PELYS, PELYX, PELLIS (πελυσ, πελυξ, πελλις, 'a dish' or 'bowl.') The pelvis. Hence, *Pelyomēter*, or *Pelycometer* (μετρον, 'measure.') A pelvimeter.

PEPSIS (πεψις) (πεπω, 'I concoct,' 'I digest;') digestion. *Pepansis* and *Pepasmus*, concoction. *Pepastic* and *Peptic*, concerning digestion. *Dyspepsia* (δυσ, 'with difficulty;') indigestion.

PERI (περι) 'about,' 'on all sides,' 'round about.' An augmentative. Hence, *Perialgia* (αλγος, 'pain.') A severe and general pain. *Periamma* and *Periapton* (περιαμμα, περιapτον) (απτω 'I hang to.') An amulet. *Pericardium* (καρδια, 'the heart') the membrane surrounding the heart. *Perichondrium* (χονδρος, 'a cartilage') the membrane covering a cartilage. *Pericranium* (κρανιον, 'the skull') the membrane covering the skull. *Perinæum* (ναος, 'temple'(?)) the space between the parts of generation and the anus. *Periosteum* (οστεον, 'a bone') the membrane covering a bone. *Peripneumonia* (πνευμωνια, 'inflammation of the lungs') pneumonitis. *Peristaltic* (στελλω, 'I send') vermicular motion, as of the intestines; *Peristölē*. *Peritonæum* (τεινω, 'I stretch') the membrane lining the abdomen.

PERŌNE (περονη) 'a clasp.' The fibula. Hence, *Peronæus*, a muscle of the fibula.

PETRA, PETROS (πετρα, πετρος) 'a stone.' The petrous or hard portion of the temporal bone. Hence, *Petrelæum* (ελαιον, 'oil') petroleum, rock or stone oil.

PHACOS (φακος) 'a lentil or lens;' also, a freckle. *Phacitis*, inflammation of the crystalline lens. *Phacopsis* (ωψ, 'face') one with a freckled face. *Phacoscotōma* (σκοτωμα, 'darkness') cataract.

PHAGO (φαγω, 'to eat.') Hence, *Phagæna* and *Phagedæna*, an eating ulcer. *Dysphagia* (δυσ, 'difficult') difficulty of deglutition.

PHALACROS (φαλακρος, 'bald.') Hence, *Phalacrōma*, baldness; and *Phalacrōtes*.

PHALANX and PHALANGE (φαλαγξ, and φαλαγγη,) 'a row or series.' The small bones of the fingers and toes are called *Phalanges*. *Phalangōsis* (φαλαγγωσις) trichiasis. *Phalangettianus*, any thing relating to the third phalanx of the fingers or toes. *Phalanganianus*, any thing relating to the first phalanx. *Phalanganianus*, any thing relating to the second.

PHALLUS (φαλλος) 'the penis.' Hence, *Phallocarcinōma* (καρκινωμα,

‘caneer’) cancer of the penis. *Phallorrhagia* (‘ξαγη, ‘a violent flow’) hemorrhage from the male organ.

*PHARMACON* (φαρμακον) ‘a medicine.’ Hence, *Pharmacēum* (φαρμακειον) an apothecary’s shop; a pharmacy. *Pharmacuticē*, *Pharmacia*, the art of preparing medicines; Pharmacy. *Pharmacology* (λογος, ‘a discourse’) materia medica. *Pharmacopœia* (ποιεω, ‘I make’) an officinal direction for the preparation of medicines. *Pharmacopōla* (πωλεω, ‘I vend’) a vender of drugs; an apothecary.

*PHARYNX* (φαρυγξ,) *PHARYX* (φαρυξ,) *PHARUS* (φαρος) ‘the swallow;’ the top of the gullet. Hence, *Pharyngitis*, inflammation of the pharynx. *Pharyngotomy* (τομη, ‘incision’) the operation of cutting into the pharynx.

*PHATNE* (φατην,) *PHATNION* (φατηνιον) an alveolus. Hence, *Phatnorrhagia* (‘ξαγη, ‘a violent flow’) hemorrhage from the alveoli.

*PHIMOS* (φιμος) ‘a muzzle, a bit.’ Hence, *Phimōsis*. A constriction of the prepuce, so that it cannot be drawn back over the glans.

*PHLEBS* (φλεψ) ‘a vein.’ Hence, *Phlebeurysma* (ειρυσμα, ‘dilatation’) a varix. *Phlebitis*, inflammation of a vein. *Phlebotomy* (τομη, ‘incision’) venesection.

*PHLEGMA* (φλεγμα, genitive, φλεγματος) ‘heat, inflammation;’ also, phlegm. Hence, *Phlegmagogue* (αγω, ‘I expel’) a cathartic, that expels mucus. *Phlegmasia*, inflammation. *Phlegmatia*, a watery or phlegmatic swelling. *Phlegmatopyra* (πυρ, ‘fever’) a mucous fever. *Phlegmatorrhœa* (ξεω, ‘I flow’) a catarrh. *Phlegmon* (φλεγμονη) inflammation; also, an inflammatory swelling. *Phlegmonōdes* (ειδος, ‘resemblance’) inflammatory. *Phlegmymenitis* (‘υμην, a ‘membrane’) inflammation of a mucous membrane.

*PHLOX* (φλοξ) ‘flame.’ Hence, *Phlogōdes* (ειδος, ‘form, resemblance’) inflamed. *Phlogopyra* (πυρ, ‘fever’) inflammatory fever. *Phlogōsis*, inflammation. *Phlogotica*, inflammations.

*PHLYCTIS* (φλυκτις) and *PHLYCTÆNA* (φλυκταινα) (from φλυω, φλυζω, ‘I boil’) a vesicular eruption. *Phlyctænoid* (φλυκταινωδης) resembling Phlyctænæ. *Phlyzacium* (φλυζακιον) a vesicular eruption. *Phlysis*, a genus to which *Paronychia* belongs. [Good.]

*PHOBOS* (φοβος) ‘dread.’ Hence, *Phobodipson* (διψα, ‘thirst’) hydrophobia.

*PHONE* (φωνη) ‘voice.’ Hence, *Phonica*, *Phononōsi* (νοσος, ‘a disease’) diseases of the voice. *Aphōnia* (α privative) loss of voice. *Dysphōnia* (δυσ, ‘difficult’) impaired voice.



PHŌROUS (φερω, 'I carry') a suffix denoting conveyance. Hence, *Galactophŏrous* (γαλα, γαλακτος, 'milk') a conveyor of milk.

PHREN (φρεν) 'the mind.' The diaphragm. Hence, *Phrenitis*, inflammation of the brain; also, *Phrenēsis*, *Phrenētiāsis*, and *Phrenetismus*. *Phrenic*, belonging to the diaphragm. *Phrenology* (λογος, 'a discourse') the doctrine of the mind; *craniology*.

PHRIX (φριξ, genitive, φριχος) PHRICE (φριχη) PHRICASMUS (φριχασμος) 'shivering.' Hence, *Phricōdes* (ειδος, 'form') *Febriis algida*.

PHTHEIR (φθειρε) 'a louse.' Hence, *Phtheiriāsis* or *Ptheriāsis*. The *Morbis pediculosus*.

PHTHOE (φθοη) (φθιω, 'I waste away.') *Phthiāsis*, consumption. Hence, *Phthical*, consumptive. *Pthisuria* (ουρος, 'urine') diabetes mellitus.

PHYMA (φυμα, genitive φυματος) (φνω, φισω, φυσω, 'I inflate') a swelling. *Phymatēus*, belonging to a swelling. *Phymation* (φυματιον) a small boil. *Physa* (φισα) a bladder. A bulla or bleb. *Physconia*, a prominence of the lower belly. Pot belly. *Physēma*, inflation with wind. *Physomētra* (μητρα, 'the womb') inflation of the womb by air. *Physothorax*, pneumothorax.

PHYSIS (φυσις—φνω, 'I generate') nature. Hence, *Physics*, the doctrine of nature; and *Physiology* (λογος, 'a discourse') now generally restricted to the doctrine of the functions of the human body. *Physiognomy* (γνωσις, 'deserimination') the art of judging of disposition, &c. by the countenance. *Physiatriē* (ιατριχη, 'the healing art') the vis medicatrix naturæ.

PHYTON (φυτον) 'a plant,' 'a vegetable' (same etymon.) *Phytology* (λογος, 'a discourse') botany. *Phytotomy* (τομη, 'incision') vegetable anatomy.

PICROS (πικρος) 'bitter.' Hence, *Picromel* (μελι, 'honey,' having the consistence of honey) the bitter principle of the bile. *Picrotoxine* (τοξικον, 'a poison') 'bitter poison.' The poisonous principle of the *Cocculus Indicus*.

PITYRON (πιτυρον) 'bran.' Hence, *Pityriasis*, dandriff.

PLAGA, PLEGE (πληγη) 'a stroke.' Hence, *Hemiplēgia*, &c.

PLASTIC (πλαστικος) 'forming, formative.' Hence, *Plasticismus*, the formative impulse, or *bildungsstrieb*. *Blepharoplasticē* (βλεφαρον, 'the eyelid') formation of a new eyelid.

PLATYS (πλατυς) 'flat, broad.' Hence, *Platysma* (πλατυσμα) a broad surface;—as *Platysma-myodes*, a broad muscle of the neck.

PLERES (πληρης) PLENUS: 'full.' Hence, *Plerōsis*, and *Plerōma*. Fulness. Repletion. Plethōra (πληθωρη, from πληθω, 'I fill') fulness of vessels.

PLEURA (πλευρα) 'the membrane lining the chest' (from πληρης [?]). Hence, *Pleuralgia* (αλγος, 'pain') and *Pleurodynē* (οδυνη, 'pain') pain in the side. *Pleurēsia* and *Pleuritis*. Inflammation of the pleura. *Pleurothotōnos* (πλευροθεν, 'from the side.' and τεينو, 'I extend') tetanus lateralis.

PLEXIS (πληξίς) same as PLAGA and PLEGE, 'a stroke.' Hence, *Pleximēter* (μετρον, 'measure,') the measurer of a stroke. An instrument used in percussio.

PNEUMA (πνευμα) 'air, wind.' Hence, *Pneumatic*, belonging to air. *Pneumatica*, diseases of the respiratory function. [GOOD.] *Pneumatōsis*, flatulence. *Pneumatothōrax*, and *Pneumothōrax* (θωραξ, 'the chest') wind in the cavity of the chest. *Pneumōnia* and *Pneumonitis*, inflammation of the lungs. *Pneumonēa*, diseases affecting the lungs, their membranes or motive power. [GOOD.]

PNIGMA (πνιγμα) PNIXIS (πνιξις) PNIX (πνιξ): from πνιγω, 'I strangle.' Strangulation. Suffocation: A high degree of asthma. Hence, *Pnigalion* (πνιγαλιων) the nightmare.

PNOE (πνοη) and PNOEA (πνοη) 'breath,'—Hence, *Dyspnœa*, *Orthopnœa*, &c.

PODOS (genitive of πους, *pes*, 'the foot.') Hence, *Podāgra* (αγρα, 'a seizure') gout. *Podencephalous* (εγκεφαλον, 'the brain.') A fœtus having the brain on a kind of pedicle.

POLYS (πολυς) 'many: full.' Hence, *Polyæmia* (αἷμα, 'blood') Plethora. *Polychrestus* (χρησω, 'to use') much used;—as *Sal Polychrestum*. *Polydipsia* (διψα, 'thirst') much thirst. *Polypus* (πους, 'a foot') having many feet. A tumor compared to certain zoophytes. *Polysarcia*. Having much flesh. Obesity: also, *Polysomatia* (σωμα, 'the body'). *Polytrophia* (τροφη, 'nourishment') supernutrition.

POMPHOS (πομφος) 'a blister,' 'a bleb,' 'a vesicle.' The same as *Pemphix*, and *Pemphigus*, and *Pompholyx*.

POSIA, POSIS (ποσις) 'drinking.' Hence, *Brahyposia* (βραχυς, 'short') drinking little. The same as *Hydrophobia*.

POSTHE (ποσθη) 'the prepuce' also, 'the penis.' *Posthitis*, inflammation of the prepuce.

PRESBYS (πρεσβυς,) 'old.' Hence, *Presbyopia* (ωψ, 'vision'). The vision of the aged. Longsightedness.

**PRIAPUS** (Πριαπός) the god Priapus: also, the penis. Hence, *Priapism*. Constant and distressing erection.

**PRO** (προ) **PROS** (πρός) 'before.' Hence, *Procataretic* (κατα, and αρχω, 'I begin') precursory, preparatory. *Prodrōmus* (δρομαω, 'I run'), (προδρομος.) A precursor, forerunner. A premonitory. *Proeguniēnos* (γγεομαι, 'to precede.') The same as Procataretic. *Prognōsis* (γνωσις, 'discrimination'). Judgment regarding the future progress of a disease. *Prophylaxis* (φύλασσω, 'I guard') prevention. *Proptōsis* (πτωσις, 'a falling down') prolapsus; and *Proptōma*. *Prosōpon* (ωψ, 'the eye') the forehead. *Prosopalgia* (αλγος, 'pain') pain in the forehead. *Prostate* (σταω, 'I stand') the prostate gland. *Prostatitis*. Inflammation of the prostate.

**PROCTOS** (προκτος) 'the anus.' Hence, *Proctalgia* (αλγος, 'pain') pain in the anus. *Proctitis*. Inflammation of the anus. *Proctocēlē* (κηλη, 'rupture'); *Proctoptōma* (πτωμα, 'a falling down') and *Proctoptōsis* (πτωσις, 'a falling down') Prolapsus ani.

**PROTOS** (πρωτος) the first.' As *Protogāla*, (γαλα, 'milk') the colostrum or first milk.

**PSEUDOS** (ψευδος) 'false.' Hence, *Pseudacōē* (ακοη, 'audition,') false hearing. *Pseudæsthēsis* (αισθησις, 'feeling') depraved feeling. *Pseudomēniux* (μηνιγξ, 'a membrane') a false membrane. *Pseudomorphē* (μορφη, 'form.') A false or irregular form. *Pseudopia*, *Pseudopsis*, *Pseudopsis* (οψις, 'vision'). False vision. *Pseudo-syphilis*, spurious syphilis.

**PSILOS** (ψιλος) 'bald, naked: bare.' Hence, *Psilōma* (ψιλωμα) 'baldness.' *Psilōsis* (ψιλωσις) the act of making bald. *Psilōthron* (ψιλωθρον) a depilatory.

**PSOA** (ψοα) 'the region of the loins.' Hence, *Psoas*, applied to a muscle, and an abscess. *Psoitis*. Inflammation of the psoas muscle.

**PSOPIOS** (ψοπος) 'a rattling noise.' Hence, *Psophēma* (ψοφημα), and *Psophēsis* (ψοφησις). A sonorous discharge of wind.

**PSORA** (ψωρα) 'the itch.' Hence, *Psoriasis*. An itching eruption. *Psorophthalmia* (οφθαλμος, 'the eye') an itching ophthalmia.

**PSYCHE** (ψυχη) 'the soul,' the mind. Hence *Psychology* (λογος, 'a description') the doctrine of the mind: mental philosophy.

**PSYCHROS** (ψυχρος) 'cold: frosty: cool.' Hence, *Psychrolūtron* (λουω, λουτρεω, 'to wash') the cold bath. *Psychroposia* (ποσις, 'drink') the use of cold drinks. *Psyclicus*. A refrigerant.

PTARMOS (πταρμος,) sneezing, sternutation. Hence, *Ptarmica*. Sternutatories.

PTERYX (πτερυξ) 'a wing.' Hence, *Pterygium* (πτερυγιον) a small wing. An aliform formation, extending from the lachrymal caruncle towards the cornea. *Ptcrygōdes*, *Pterygoid* (ειδος, 'shape') wing-shaped. As the *Pterygoid processes*.

PTŌCHOS (πτωχος) 'a poor person.' Hence, *Ptochocomium* (χομεω 'I take care of') and *Ptochodochium* (δεχομαι, 'I receive') an almshouse.

PTŌMA (πτωμα) 'a fall;' and PTŌSIS (πτωσις) 'falling.' Common suffixes denoting Prolapsus;—as *Archoptōma*, and *Archoptōsis* (αρχος, 'the anus'). Prolapsus ani.

PTYALON, PTYELON (πτυαλον, πτυελον) 'saliva,' (πτυνω, 'to spit'). Hence, *Ptyalagogues* (αγω, 'to expel') salivants. *Ptyalism*. Salivation. From the same root proceed, *Ptysis*, (πτυνσις) the act of spitting, and *Ptysma*, the sputum; *Ptysmagogue* (αγω, 'to expel;') an expectorant.

PYLE (πυλη) *porta*, 'a gate, or door.' Hence, *Pylemphraxis* (εμφραξις, 'obstruction;') an obstruction of the vena portæ. *Pylōrus* (πυλωρος, 'a door-keeper.') The lower orifice of the stomach.

PYON (πυον) PYOS (πυος) 'pus.' Hence, *Pyogenia* (γεννωω, 'I form,') and *Pyōsis* and *Pyopoiēsis* (ποιεω, 'to make.') The formation of pus; suppuration. *Pyothōrax* (θωραξ) 'the chest;' Empyema. *Pyūria* (ουρον, 'urine;') purulent urine.

PYR (πυρ) 'fire;' also fever heat, and fever. *Pyra* (πυρα) and *Pyretos* (πυρετος) fever. *Pyrectica*, fevers. [GOOD.] *Pyretology* (λογος, 'a discourse.') The doctrine of fever. *Pyrexia* (πυρεξια) 'fever;') an attack of fever. *Pyrōsis* (πυρωσις, 'burning;') heartburn; water brash.

## R.

RACHIS or RHACHIS (ραχίς) 'a thorn;' the spine. Hence, *Rhachialgia* (αλγος, 'pain;') pain in the back: also, *Colica Pictonum*. *Rhachitis*, inflammation of the spine: also, *Rickets*.

RAGE or RHAGE (ραγη) as a suffix, means violent rupture or discharge; as in *Hemorrhagia*, *Menorrhagia*, &c. &c. [See RHESIS.]

RAX or RHAX (ραξ, genitive ραγος) 'a grape;' *uva*. Hence, *Rhag-*



ōdes, *Rhagoïdes* (ῥαγος, 'resemblance;') grapelike. The *uvea* is so called.

RAPHĒ or RHAPHĒ (ῥαφή) 'a suture;' and *Raphis* or *Rhaphis* (ῥαφίς) 'a needle.' Hence, *Rhaphiancistrum* (αγκιστρον, 'a hook;') an instrument for drawing the iris forward.

RHACHIS, see RACHIS.

RHAGE, see RAGE.

RHAX, see RAX.

RHEUMA (ῥευμα) 'a flux,' (ῥεω, 'I flow.') Hence, *Rheumatalgia* (αλγος, 'pain;') a rheumatic pain; *Rheumatism*. *Rheumatopyra* (πυρα, 'fever;') rheumatic fever.

RHĒXIS (ῥήξις) 'a tearing away,' 'a rupture.' Like *Rhagē*.

RHIN, RHIS (ῥιν, ῥις, genitive ῥινος) 'the nose.' *Rhinoplastic* (πλασσω, 'I form.') 'The T'aliacotian operation. *Rhinorrhagia* (ῥαγή, [see RAGE], Epistaxis.

RHOĒ (ῥοή) and RHŒA, 'a flux;' a flow; as *Diarrhœa*, *Hæmorrhœa*, &c. &c.

RHOMBOS (ῥομβος) 'the rhomb,'—a mathematical figure. Hence, *Rhomboid* (ειδος, 'shape.') The muscle *Rhomboïdes*.

## S.

SALPINX (σαλπιγξ, genitive σαλπιγγος) 'a trumpet;' the Eustachian trumpet, or tube. Hence, *Salpingemphraxis* (εμφραξις, 'obstruction;') obstruction of the Eustachian tube.

SAPROS (σαπρος) 'foul;' of bad odour. Hence, *Saprostōmus* (στομα, 'mouth.') One who has an offensive breath.

SARX (σαξ, genitive σαρκος) 'flesh.' Hence, *Sarcōma* (σαρκωμα) 'a fleshy tumor.' *Sarcomatous*, *Sarcomatōdes* (ειδος, 'resemblance;') fleshlike; fleshy. *Sarcōsis*, the formation of flesh.

SCAPHĒ (σκαφή) 'a trough, a dish, a ship.' Hence, *Scaphoïdes*, *Scaphōdes* (ειδος, 'shape;') dishshaped, or shipshaped, as the *os scaphoïdes*, or *os naviculare*.

SCELOS (σκελος) 'the leg;' the shin-bone. Hence, *Scelalgia* (αλγος) 'pain;') pain in the leg. *Scelotyrbē* (τυρβη, 'weakness, restlessness;') weakness or tottering of the knees.

SCIRRIUS (σκιρσιος) 'hard, indurated;' a tumor of a cancerous hardness. Also, *Scirrhōma*, *Scirrhocēlē* (κηλη, 'tumor;') a hard fleshy tumor.

SCLEROS (σκληρος) 'dry, hard;' (σκαλλω, 'I dry;' hence, *skeleton*.)

*Sclerēmia*, *Sclerēmus*, the induration of the cellular tissue of the newborn. *Sclerotica* (*tunica*), the hard coat of the eye.

SCOPE (σκοπη) SCOPIA (σκοπια) SCORUS (σκοπος) 'from σκοπεω, 'I look around.' A common suffix to words, meaning 'view or inspection; as *Cranioscopy*: *Stethoscope*, &c.

SCOTOS (σκοτος) 'darkness.' Hence, *Scotōdinē*, (δινος, 'vertigo;') vertigo, with darkness before the eyes.

SCYBALON, (σχυβαλον) 'dung;' also, hard, dried excrement.

SCYTOS (σχυτος, χυτος, *cutis*), 'the skin;' leather. Hence, *Scytitis*, inflammation of the skin. *Scytodephium* (δεφω, 'I moisten;') tannin.

SEMA (σημα) SEMEION (σημειον) 'a sign,' 'a symptom.' Hence, *Scmiology* or *Scmiology* (λογος, 'a discourse.') 'The doctrine of symptoms. *Scmeioticē* or *Scmioticē*, semiology.

SEPSIS (σεψις) 'putrefaction;' also, SEPEDON, (σεπεδων) *Septic*, a promoter of putrefaction. *Septopyra* (πυρα, 'fever,') a putrid fever.

SESAMON (σησαμον) 'the seed of the *scsamum*.' Hence, *Sesamoid*, *Scsamōides*, *Scsamōdes* (ειδος, 'resemblance;') scsamum-like; as the *scsamoid bones*.

SIALON (σιαλον), SIELON (σιελον) 'saliva.' Hence, *Sialagogues* (αγω, 'I expel;') salivants.

SIGMA (σιγμα) 'the old Greek s or c.' Hence, *Sigmatōdes*, *Sigmōdes*, *Sigmoid* (ειδος, 'form;') like the c; semilunar in shape;—as the *sigmoid valves*.

SITOS (σιτος) 'food.' Hence, *Sitology* (λογος, 'a discourse.') 'The doctrine of food.

SŌMA (σωμα) 'body.' A common suffix to words.

SPASMUS (σπασμος) (σπαω, 'to draw up;') 'spasm, cramp.' Hence, *Spasmodic* (ειδος, 'resemblance;') relating to spasm. *Spastic*.

SPERMA (σπερμα) 'sperm, seed.' Hence, *Spermatic*, relating to the sperm. *Spermatopoiētie* (ποιεω, 'to make;') sperm making.

SPIACĒLUS (σφακελος) 'mortification.' *Sphacclōid* (ειδος, 'resemblance;') gangrenous.

SPHEN (σφην) 'a wedge.' Hence, *Sphcnoid* (ειδος, 'resemblance;') wedgeshaped, as the *sphcnoid bone*.

SPIINXIS (σφιγξις) 'the act of binding or constricting.' Hence, *Sphincter*, a constrictor, as the *sphincter ani*. *Sphingonta*, astringents, styptics.

SPIHYGMUS, SPIHYGMA (σφυγμος, σφυγμη) 'the pulse.' Hence,

*Sphygmoid* (εἶδος, 'likeness;') pulsatile. *Sphymology* (λογος, 'a discourse.') The doctrine of the pulse. *Sphygmomēter* (μετρον, 'a measure.') A measurer of the pulse.

*SPILOS* (σπιλος,) *SPILŌMA* (σπιλωμα) 'a mark;' a mother's mark or *nævus*.

*SPLANCHNA* (σπλαγχνα, 'the viscera;' plural of σπλαγχνον.) Hence, *Splanchnic*, belonging to the viscera. *Splanchnology*, (λογος, 'a discourse.') A treatise on the viscera. *Splanchnica*, disquiet or diseased action in the organs auxiliary to digestion. [GOOD.]

*SPONDYLUS* (σπονδυλος) 'a vertebra' Hence, *Spondylitis*, inflammation of the vertebræ.

*STAPHYLE* (σταφυλη) 'a grape;' the uvula. Hence, *Staphyloneus* (ογκος, 'swelling;') swelling of the uvula. *Staphylitis*, inflammation of the uvula. *Staphylītus*, belonging to the uvula. *Staphylōma*, a tumor of the eye, likened to a grape. *Staphyloraphy* (ραφή, 'a suture') the suture of the cleft palate.

*STEAR* (στέαρ, genitive στεατος) 'tallow, suet.' Hence, *Stearinc*, absolute suet. *Steatōma*, a tumor containing a suety substance.

*STEGNOS* (στεγνος) 'thick; inspissated; drawn together.' Hence, *Stegnotic*, an astringent.

*STENOS* (στενος) 'narrow; strait.' Hence, *Stenocardia* (καρδια, 'the heart.') *angina pectoris*.

*STERNUM* (στερνον) 'the breast bone.' *Sternalgia* (αλγος, 'pain.') *angina pectoris*.

*STETHOS* (στηθος) 'the breast.' Hence, *Stethoscope* (σκοπειω, 'I view,' 'I examine.') An instrument used in the diagnosis of chest diseases.

*STHENĪA* and *STHENOS* (σθενος) 'strength.' Hence, *Sthenic*, connected with strength. *Asthenic*, (α, privative) connected with privation of strength.

*STOLE* (στολη, a 'mission.') Hence, *Diastōlē* (διαστέλλω, 'I dilate;') dilatation of the heart. *Systōlē* (συστέλλω, 'I contract;') contraction of the heart.

*STOMA* (στομα, genitive στοματος) 'the mouth.' Hence, *Stomatic*, a remedy for the mouth. *Astomia*, (α, privative) the state in which the mouth is wanting.

*STRABUS* (στραβος) 'twisting;' one who squints. *Strabismus*, the act of squinting.

*STRANX* (στραγξ) 'a drop.' Hence, *Strangury* (ουρον, 'urine;') the urine passed by drops.

STROPHY (στροφη) 'a turning,' 'a version.' Hence, *Exstrophy* (ἐξ, 'out.') An eversion, or turning out: extroversion.

STYLUS (στυλος) 'a style or pen, a pillar.' Hence, *Styloid*, *Stylodes* (εἶδος, 'form;') style-like, as the *styloid process*.

STYMA (στυμα) 'priapism.' *Stymatōsis* and *Stymatorrhagia* (παγη, 'violent discharge.') Bleeding from the penis, when in a state of erection.

STYPSIS (στυψις) 'astringency; condensation.' Hence, *Styptic*, an astringent.

SYCON (συκον) *figus*, 'a fig.' Hence, *Sycōma*, a tumor like a fig.

SYM, SYN (συν) 'with, together:'—like the *cum*, *col*, *con*, *cor*, of the Latins. Before *b*, *p*, *ph*, *ps*, and *m*,—*syn* or *xyn* are changed into *sym* or *xym* (*com*): before *c*, *ch*, *g*, *k*, and *x*, into *syn* or *xyn*,—*συν* or *ξυν* (*con*): before *l* into *syl* or *xyl* (*col*): before *r* into *syr* or *xyr* (*cor*): and before *s* into *sy* or *xy*, *sys* (*co* and *cos*.) Hence, *Symphysis* (φύω, 'I grow.') A conjunction or union; as well as a bond of union. *Synaëtica* (αγω, 'I drive;') inspissants. *Synaëtia* (αἰτια, 'a cause,') *concausa*. A fellow cause. *Synanēhē* (αγκω, 'I choke;') angina. The same as *Cynanēhe*. *Synarthrōsis* (αρθρον, 'a joint;') a joint having little or no motion. *Synchondrōsis* (χονδρος, 'a cartilage;') a joint by means of cartilage. *Synchondrotomy* (τομη, 'incision.') The section of the symphysis pubis. *Syn-cōpē* (χοπεω, 'I strike;') fainting. *Synerasis* (κρασις, 'a mixture;') a commixture. *Syndesmus* (δεσμος, 'a ligament;') a ligamentous union. *Syndesmology* (λογος, 'a description;') a description of the ligaments. *Syndesmōsis*, a union by means of ligament. *Synechīa* (εχω, 'I hold.') An adhesion between the iris and capsule of the lens, or the cornea. *Synizēsis* (ιζω, 'I place upon.') Closure of the pupil. *Synōcha*, and *Synōchus* (εχω, 'I hold;') a continued fever. The former has been used for a more inflammatory fever than the latter. *Syssarcōsis* (σαρξ, 'flesh;') a union by means of flesh. *Systole* (στελλω, 'I send;') contraction, especially of the heart.

SYRINX (συριγξ) 'a pipe;' a fistula. Hence, *Syringōdes* (εἶδος, 'resemblance.') *Fistulous*. *Syringotomy* (τομη, 'incision.') The operation for fistula.



## T.

**TAXIS** (ταξις) 'order;' the restoration of order; the restoration of displaced parts,—as in hernia. *Taxiologia* (λογος, 'a discourse;') symptomatology.

**TECNOX** (τεκνον) 'a child.' Hence, *Tecnoctonia* (κτονος, 'murder;') infanticide.

**TERAS** (τερας, genitive τερατος) 'a monster.' Hence, *Teratology* (λογος, 'a description.') A description, or the doctrine of monsters.

**TETANUS** (τετανος) 'extended, stretched;' from τεινω, 'to extend.' A disease, characterised by tonic spasms. Hence, *Tetanic*, suffering under, or belonging to, tetanus.

**THANXTOS** (θανατος) 'death.' Hence, *Thanatology*, (λογος, 'a discourse.') The doctrine of death.

**THELE** (θηλη) 'the female breast; the nipple;' (θαω, 'I milk,' 'I give milk.') *Thelitis*, inflammation of the nipple. *Thelomus* (ογκος, 'tumor,') a tumor of the breast.

**THIER** (θηρ, genitive θηρος) 'an animal;' 'a wild animal.' Hence, *Thēria* (diminutive) worms in bodies. *Theriaca*, antidotes or counterpoisons. *Theriotomy* (τομη, 'incision;') animal anatomy.

**THERAPEIA**, **THERAPIA**, **THERAPEUSIA**, **THERAPEUTICA**, or **THERAPEUTICÆ**, (from θεραπω, 'I warm,' 'I cherish;') 'service; ministry.' The healing art.

**THERMA** or **THERME** (θερμα, genitive θερματος; θερμη) 'heat.' Hence, *Thermæ*, warm springs. *Thermal*, concerning warm springs.

**THESIS** (θεσις, 'a position.') A suffix, denoting 'arrangement.' Hence, *Diathēsis* (δια, 'throughout.') The disposition or habit of the body, or of a part of the body.

**THORAX** (θωραξ, genitive, θωρακος,) 'a cuirass;' the chest. Hence, *Thoracica*, pectoral remedies. *Thoracocentēsis* (πεντιω, 'I puncture.') *Paracentēsis thoracis*, *Thoracoscopy*, stethoscopy, percussion, &c.

**THROMBUS** (θρομβος) 'a clot of blood.' *Grumus*. *Thrombōsis*. Coagulation of the blood.

**THRYPSIS** (θρυψις) 'a breaking, crushing, or rubbing to pieces.' Hence, *Thryptic*, that which breaks to pieces,—as *Lithonthryptic*.

ῬΥΜΙΑΜΑ (θυμιαμα) 'a fumigation.' *Thymiāsīs*—the act of fumigating.' Cure by fumigation.

ῬΥΜΟΣ (θυμος) 'the gland, or glandiform body, of the thorax;' so called, it has been presumed, from its resemblance to the head of the flower of the *Thynius*, a kind of leek or wild onion[?]. *Thymītis*. Inflammation of the *Thymus* gland.

ῬΥΡΑ (θυρα) 'a door;' ῬΥΡΕΟΣ (θυρεος) 'a shield.' In composition, *Thyreō*, and *Thyro*, mean the *Thyroid cartilage*. *Thyroid*. *Thyreōdes*, *Thyrcōides* (εἶδος, 'resemblance') shield-shaped,—as the *Thyroid cartilage*. *Thyreoncus* (ογκος, 'a tumor') a tumor of the thyroid gland. Goitre: also *Thyreophyma* (φυμα, 'a swelling') and *Thyreocēlē* (κηλη, 'a tumor').

ΤΟΚΟΣ (τοκος) 'childbirth.' Hence, *Tocology* (λογος, 'a discourse') the art of obstetries.

ΤΟΜΗ, ΤΟΜΟΣ (τομη, τομος) 'incision.' A common suffix,—as in *Lithotomy*, *Bronehotomy* &c. *Tomotōcia* (τοκος, 'parturition') the Cæsarean section.

ΤΟΝΟΣ (τονος) 'tone,' (τενω, 'I stretch') a state of tension proper to each organic texture. Hence, *Tonic*, that which gives tone; and *Tonicity*, the faculty that determines the general tone.

ΤΟΠΟΣ, ΤΟΡΟΣ (τοπος) 'a place.' *Topical*, local. *Topographical* (γρᾶφη, 'description') describing places or regions. Hence, *topographical anatomy*.

ΤΟΞΑ (τοξα, the plural of τοξον, 'a bow' 'an arrow.') Hence, *Toxicum*, (τοξικον) a poison; formerly, a poison for arrows. *Toxicology* (λογος, 'a discourse') a treatise on poisons.

ΤΡΑΧΥΣ (τραχυς) 'rough, uneven.' Hence, *Trachēa* (τραχεια) (αετηγεια) the windpipe. *Trachcītis*, inflammation of the windpipe; croup. *Trachēlus* (τραχηλος) the neck; both it and *trachea* are so called, on account of the roughness of the cartilages and cervical processes.

ΤΡΑΓΟΣ (τραγος) 'the buck-goat.' The odour of the armpits; also, the anterior cartilage of the ear. *Tragīcus*, a muscle of the tragus of the ear.

ΤΡΑΠΕΖΑ (τραπειζα) 'a table.' Hence, *Trapezium*—the foursided figure; and the muscle *Trapezius*, so called from its shape. *Trapezōdes* or *trapezoides* (εἶδος, 'resemblance') a name given to the anterior portion of the *Ligamentum coraco-claviculare*; and to the second bone of the second row of the carpus.

**TRAUMA** (τραυμα) 'a wound.' Hence, *Traumatic*; belonging to a wound.

**TREMA** (τρημα) (τρεω, 'I bore') 'a hole or foramen.' *Trēsis* (τρησις) the act of boring or perforating. *Atresia* (α, privative) the state of being imperforate or of having no aperture, where one ought to exist. *Trepānum* or *Trypānum* (τρεπανον) the trepan; (or from τρεπω, 'to turn.')

**TRI** (τρι) in composition, 'three.' Hence, *Triorchis*, (τριορχις, (ορχις, 'a testicle') one who has three testicles. *Trisplanchnic* (σπλαγχνον, 'a viscus') the great sympathetic; so called, because distributed to the three splanchnic cavities. *Trisplanchnia*, the Asiatic cholera.

**TRICHES** (τριχες; plural of τριξ, genitive τριχος) 'the hair.' Hence, *Trichiasis*, a disease of the hair. *Trichismus*, a splitting of the hair. *Fissura pilaris*. *Tricocephalus* (τριφαλη, 'head') and *Trichūris* (ουρα, 'a tail') a hairworm; hairtailed. *Trichonōsi* (νοσος, 'a disease') diseases of the hair.

**TRIPSIS** (τριψις) 'rubbing; friction.' See *THIRYPSIS*. From τριβω, 'I rub.' Hence, also, *Trisis* (τρισις) rubbing or grinding the teeth; and *Trismus* (τρισμος) lock-jaw.

**TRITOS** (τριτος) 'the third.' As *Tritoxide*, an oxide of the third degree.

**TROCHIOS** (τροχος) 'a wheel,' from τρεχω, 'to run; to make run.' Hence, *Trochanter* (τροχαντης) 'a runner;' two prominences on the thigh bone are so called. *Trochanteric*, belonging to the trochanter. *Trochantinian*, belonging to the lesser trochanter or *trochantin*. [CHAUSSIER.] *Trochīter*, the larger of the tubercles of the os humeri. *Trochin*, the lesser of the two. [CHAUSSIER.] *Troche*, a lozenge of a circular shape. *Trochlea* (τροχαλια) a pulley, and *Trochlearis*, the pulley-muscle of the eye. *Epitrochlea* (επι, upon) the inner condyle of the os humeri. [CHAUSSIER.]

**TROPHE** (τροφη) 'nourishment.' Hence, *Atrōphy*, wasting. *Hypertrophy*; super-nutrition, &c. *Trophonōsi* (νοσος, 'a disease') diseases of nutrition.

**TYLUS**, **TYLOS** (τυλος) *Callus*; thickening of the cuticle. Hence, *Tylōma*, callosity of the hands or feet.

**TYMPANUM** (τυπανον) 'a drum,' the drum of the ear. *Tympanites*, *Tympany*, a disease in which the abdomen is distended with air, and sounds like a drum. Hence, *Tympanitic*, belonging to, or resembling, tympanites.

ΤΥΦΙΛΟΣ, ΤΥΦΙΛΟΣ, (τυφλος) 'blind.' *Typhlōsis* and *Typhlōtes*, blindness.

ΤΥΦΙΟΣ (τυφος, 'smoke.') A fever, accompanied with cloudiness of the intellect. (?) *Typhoid* (ειδος, 'resemblance;') resembling typhus. *Typhomania*, violent delirium, with alternation of stupor.

ΤΥΡΒΗ (τυρβη) (τυρβω, 'I disturb;') restlessness, disorder. [See SCELOTYRBE.]

ΤΥΡΟΣ (τυρος) 'cheese.' *Tyremesis* (εμεω, 'to vomit,') and *Tyrosis*: the vomiting of curd, by children. *Tyrōma*, a cheesy tumor.

## U.

ΥΛΗ (ουλη) 'a cicatrix,' (ουλος, 'solid, whole.') Perhaps from this comes *Ulon* (ουλον) the gum. *Uitis*, inflammation of the gum. *Uloncus* (ουχος, 'swelling;') a swelling of the gum. *Ulotica*, medicines that favor cicatrization.

ΥΡΟΝ (ουρον) 'urine.' Hence, *Urachus* (ουραχος, ουραγος) (εχω, 'I hold;') or αγω, 'I expel.') A canal for the urine. *Urēsis* (ουρησις) the voiding of urine. *Urēter* (ουρητηρ) a channel for the urine from the kidney. *Ureteritis*, inflammation of the ureter. *Urēthra* (ουρηθρα) the canal for the discharge of the urine from the bladder. *Urethritis*, inflammation of the urethra. *Urethrorrhagia* (ραγη, 'a violent discharge;') hemorrhage from the urethra. *Uretic*, a diuretic. *Urocystis* (ουροστις, 'a bladder;') the urinary bladder. *Urolithus* (λιθος, 'a stone;') a urinary calculus. *Uromantia* (μαντεια, 'divination;') divination by the urine. *Uroscopy* (σκοπω, 'I examine;') investigation of the urine.

ΥΡΟΣ, ΥΡΙΣ (ουρα) 'a tail.' Hence, *Hippūris* (ιππος, 'a horse;') horse-tail; the *cauda equina*. *Oxyūris* (οξυς, 'sharp;') sharp-tailed; the ascaris vermicularis. *Trichūris* (τριξ, τριχος, 'hair;') hair-tailed; the long thread worm.

## X

ΧΕΡΟΣ (ξηρος and ξερος) 'dry; hard.' Hence, *Xeransis* (ξηρανσις) *Xerasia* (ξηρασια) and *Xerasmus* (ξηρασμος) dryness, as of the hair. *Xerophthalmia* (οφθαλμια, 'inflammation of the eye;') ophthalmia, without discharge. *Xerotribia*, (ξηροτριβια) and *Xerotripsis* (τριβω, 'I rub;') dry rubbing.



ΧΙΡΗΟΣ (ξίφος) ‘a sword.’ Hence, *Xiphoid*, *Xiphoïdes*; *Xiphōdes* (εἰδός, ‘resemblance;’) sword-like, as the *Xiphoid* or *ensiform cartilage*.

## Z.

ΖΕΜΑ (ζεμα) ‘a decoction;’ also, *Apozem*, (ζέω, ‘to boil.’) *Zesis*, coction, and decoction. *Zestos* (ζεστος) ‘boiled.’ *Zestolusia* (λουω, ‘to wash;’) the hot-bath.

ΖΩΜΟΣ (ζωμος) ‘broth or soup.’ Hence, *Osmazome* or *Osmozome* (οσμη, ‘smell.’) A proximate principle, which gives the flavour of meat to soups.

ΖΩΟΝ (ζωον) ‘an animal.’ Hence, *Zoochemia*, animal chemistry. *Zoodynamia* (δυναμις, ‘power;’) the animal or vital force. *Zoology* (λογος, ‘a discourse;’) the science of animals. *Zoonomia* (νομος, ‘a law;’) the laws of animal life. *Zoophyte* (φυτον, ‘a vegetable;’) one of the lowest classes of animals, closely approximating to the vegetable. *Zootomy* (τομη, ‘incision;’) the anatomy of animals.

ΖΥΓΟΣ (ζυγος, *juguum*) ‘a yoke.’ Hence, *Zygōma*, the malar or cheek-bone; and *Zygomatic*, belonging to the cheek-bone,—as *zygomatic arch*, *zygomatic process*, &c.

The nomenclature of anatomy has been a subject of complaint in all times. Having had no fixed principles in its formation, it is extremely difficult for the student to attain. It is encumbered, too, unnecessarily, with forms of expression, that are any thing but concise; and on that account has drawn upon it the censures, not only of the amateur, who may be desirous of making himself acquainted with the different organs of the human body, but also of anatomical writers themselves. As regards the names of various organs, it may be difficult, and perhaps unadvisable, to change such as have been applied to them for ages,—whimsical as the causes of such appellations may have been; but the labors of the student might be greatly facili-

tated, were the anatomists of the day,—in the case of muscles, nerves, &c., which proceed from one part of the economy to another,—to adhere to the kind of nomenclature, for example, proposed by DUMAS and CHAUSSIER,—or to any other based on similar principles. Some of the muscles, indeed, are thus designated in the nomenclature—or rather, in the names—generally adopted; they are few, however, yet they are sufficient to occasion the student deep regret, that the plan has not been followed throughout.

Taking the muscles by way of elucidation, the student will soon discover, that the most heterogeneous reasons have swayed the anatomist in his selection of names. *First. Uses.* Thus we have *diaphragm* ('a partition.') *Buccinator* (*buccinare*, 'to sound a trumpet.') *Extensors, flexors, abductors, adductors, levators, depressors, &c.*

*Secondly. Position;* as *Interspinales* (between the spines of the vertebræ.) *Interossei, subclavius* (*clavis*, 'the clavicle.') *Popliteus* (*poples*, 'the ham.') *Antecubitus*, (see ANCON, in the vocabulary.) *Cubitalis*, (*cubitus*, 'the elbow;' also, one of the bones of the forearm.) *Iliacus; temporalis* (*tempus*, 'the temple,') &c. &c.

*Thirdly. Shape;* as *Trapezius*, (see TRAPEZA, in the vocabulary.) *Splenius* ('like a spleen.') *Lumbricales* (*lumbricus*, 'an earth worm.') *Serrati* (*serra*, 'a saw.') *Digastric* ('double bellied,') (see DI, in the vocabulary.) *Deltoid* ('delta shaped,') (see DELTA, in the vocabulary.) *Scalenus* (*σκαληνος*, 'irregular,' 'unequal.') *Rhomboïdes*, (see RHOMBOS, in the vocabulary, &c. &c.)

*Fourthly. Dimension;* as *pectoralis major; rectus capitis anticus major. Glutæus—maximus, minimus* and *medius, &c.*

*Fifthly. Direction;* as *Obliquus abdominis; transversalis abdominis; Rectus femoris; Rectus abdominis, &c. &c.*

*Sixthly. Composition;* as *Semi-membranosus; semitendinosus; complexus, &c. &c.*

*Seventhly. Attachment;* as *sterno-cleido-mastoideus*—according to the different points of the skeleton, with which they are connected by means of tendons or aponeuroses. Thus—in the case of the muscle just mentioned—the name indicates, that it is attached to the sternum, clavicle ( $\alpha\lambda\epsilon\iota\varsigma, \alpha\lambda\epsilon\iota\delta\omicron\varsigma$ ) (see the vocabulary, under *CLEIS*) and mastoid process of the temporal bone,—or, according to common expression, that the muscle arises from the sternum and clavicle, and is inserted into the mastoid process. This is the principle on which the nomenclature of *CHAUSSIER* is founded, and it is good,—inasmuch as, when the student has attained the name of the muscle, it suggests the seat, and likewise the use; for the main action of a muscle is back from its insertion towards its origin. The *sterno-cleido-mastoideus*, when it contracts, has its fibres drawn towards the sternum and clavicle; and, of course, the head, of which the mastoid process forms part, is moved. The order of contraction is, however, reversed occasionally, so that the origin and insertion, so far as regards their physiological action, change places. Thus, the deltoid muscle, as it is usually called,—the *infra-acromio-humeralis* of *CHAUSSIER*,—issues, as the latter appellation imports, from below the acromion process of the scapula, and is inserted into the os humeri. When the muscle contracts, in its usual direction, the os humeri is moved by it, as when we raise a weight: but if the body be in the recumbent

posture, and the individual attempt to raise himself, by laying hold of a rope or cross-bar above him, then the muscle contracts towards the humeral attachment, and the scapula and body are elevated.

The value of this kind of nomenclature will be readily apprehended, if we cast our eye over any table of muscles, in which the old, and the new names proposed by Chaussier, are placed in juxta-position. Valid objections may, indeed, be urged against some of the names of the French anatomist, but as his nomenclature is followed by many, it might be as well, perhaps, to adopt it without modification.

OLD NAMES.	NEW NAMES.
Orbicularis palpebrarum.	<i>Naso-palpebralis.</i>
Corrugator supercilii.	<i>Fronto-superciliaris.</i>
Buccinator.	<i>Alvcolo-labialis.</i>
Masseter.	<i>Zygomato-maxillaris.</i>
Temporalis.	<i>Temporo-maxillaris.</i>
Platysma myodes.	<i>Thoraco-facialis.</i>
Psoas magnus.	<i>Prælumbo-trochanterianus.</i>
Psoas parvus.	<i>Prælumbo-pubianus.</i>
Latissimus dorsi.	<i>Lumbo-humeralis.</i>
Sphincter ani.	<i>Coccygeo-analis.</i>
Biceps flexor cubiti.	<i>Scapulo-radialis.</i>
Brachialis internus.	<i>Humero-cubitalis.</i>
Sartorius.	<i>Ilio-prætibialis.</i>
Gracilis.	<i>Infra-pubio-prætibialis.</i>

Allusion has already been made to the improvement introduced into chemistry, by the adoption of the nomenclature, which has been generally termed ‘Lavoisierian;’ the credit of which ought, however, to be divided between that distinguished chemist, and his able coadjutors, Berthollet, Guyton de Morveau, and



Fourcroy. But, subject as the views of the chemist are to change, in consequence of the discoveries,—ever and anon made,—of the composition of bodies, the nomenclature of chemistry will have to vary, in order to keep pace with the progress of the science. Thirty years ago, oxygen, as its name imports,\* was esteemed the great acidifying principle, whilst the alkalies were looked upon as simple bodies, and as antitheses to the acids. The chemical analyst has, since then, shown, that acids may be formed without oxygen, and that the alkalies—potassa and soda, for example—are compounds of oxygen with a metallic base. The erroneous idea of oxygen being the general acidifying principle—as Dr. Turner has remarked—has exercised an injurious influence over the whole structure. “But it is now too late,” he adds, “to attempt a change; for the confusion, attending such an innovation, would more than counterbalance its advantages. The original nomenclature has therefore been preserved, and such additions have been made to it as the progress of the science rendered necessary. The most essential improvement was suggested by the discovery of the laws of chemical combination. The different salts, formed of the same constituents, were formerly divided into *neutral*, *super* and *subs*alts. They were called *neutral*, if the acid and alkali were in such proportion that one neutralized the other: *super-salts*, if the acid prevailed; and *sub-salts*, if the alkali was in excess. The name is now regulated by the atomic constitution of the salt. If it is a compound of an equivalent of the acid and the alkali, the generic name of the salt is employed without any other addition; but if two or more

\* See the Glossary.

equivalents of the acid are attached to one of the base, or two or more equivalents of the base to one of the acid, a numeral is prefixed so as to indicate its composition. The two salts of sulphuric acid and potassa are called sulphate, and *bisulphate*; the first containing an equivalent of the acid and the alkali; and the second salt, two of the former to one of the latter. The three salts of oxalic acid and potassa are termed the oxalate, *bin-oxalate* and *quadroxalate* of potassa, because one equivalent of the alkali is united with one equivalent of acid in the first, with two in the second, and with four in the third salt.\*\*

It would be useless—as it would be unintelligible—to the student, to attempt here an explanation of the whole system of chemical nomenclature. To comprehend it requires some acquaintance with the first principles of the science; yet, in many—it may be said in most—cases, the foundation of the nomenclature is sufficiently simple. Formerly, as has been observed, all *acids* were conceived to contain oxygen as the acidifying principle; but if they did not hold oxygen enough to give them the acid character, they were termed *oxides*. The substance, acidified by the oxygen, gave the name to the acid,—*ic* being added. Sulphuric acid, for example, is a compound of sulphur and oxygen. But if different acids were formed by a substance with different doses of oxygen, then the termination was modified; the one with the larger dose of oxygen having the ending in *ic*, whilst the other was made to end in *ous*. Hence, we have the sulphuric and the sulphurous acids. The termination *uret* denoted

\* Elements of Chemistry, &c., by Edward Turner, M. D., &c. Fifth American from the fifth London edition, p. 124.

combinations of the simple non-metallic substances with each other, or with a metal, or a metallic oxide—as *sulphuret* of iron, which is a compound of sulphur and iron.

This course has not been abandoned, although the different degrees of oxidation are now generally distinguished by prefixes from the Greek or Latin. Thus, *protoxide* (πρωτος, ‘first,’) denotes the first degree of oxidation; *deutoxide* (δευτερος, ‘the second,’) or *binoxide*, the second; and *tritoxide* (τριτος, ‘the third,’) or *teroxide*, the third. *Peroxide* is often applied to the highest degree of oxidation.

Compounds, that consist of acids combined with metallic oxides or alkaline bases, are termed *salts*, and the names are so formed as to indicate the substances contained in them. If the salt has the acid at a maximum of oxidation, the name ends in *ate*. Hence, the *sulphate* of potassa consists of the base potassa with the *sulphuric* acid. On the other hand, if the acidified substance has a minimum of oxygen, the name is made to end in *ite*. Hence, the *sulphite* of potassa is a composition of *sulphurous* acid and potassa.

In all this, there is system; but the rage for supererogatory nomenclature prevails also here; and many innovations are constantly made, to the confusion of the student without any marked advantage to science. It would be comparatively well did the evil stop here. The rage has extended to the adoption of a style and manner, which is vicious in the extreme, and is too much based on the pleonastic style of some of the modern writers of France and Germany. It has been properly remarked by Sir Charles Bell, that although medical men may use a foreign or dead language with

propriety, they should avoid a peculiarity of style and phrase, which no one can understand unless he be initiated, and has studied the science itself so intensely, that he has also learned the jargon in which it is conveyed. He observes, "that no one but a thorough anatomist can understand the adulterated language of anatomy, nor can he understand it without some labor; for anatomists have buried their science under the rubbish of names; and there is not a difficult or hard-sounding word, upon which they have the least pretence of claim, that they have not retained; they have choked their subject with useless minutiae; they have polluted their language by transferring to it from the Latin many words, which, by their continual inflections in that language, were beautiful, while their unvaried, uncouth termination in ours is barbarous in the utterance, and tends but to interrupt and puzzle the sense: they have impressed into the service of their science a great many poor words, which would get their *habeas corpus* from any court in Christendom." "Thus,"—he continues,\*—"an anatomist will describe an artery as '*going to the radial edge of the second metacarpal bone; then supplying the abductor and flexor muscles; then going along the bone of the first phalange, seated upon this second metacarpal bone,*' with many other distortions, ambiguities, and little contrivances; to conceal (as one would believe,) that he is describing so simple a matter as the *artery of the forefinger*, which the reader at last finds out, either by some lucky chance, or by reflecting how many metacarpal bones there are, and then reckoning them first forwards, and then backwards, that he may be sure

\* *Anatomy, &c.* ii., Introduction, xxiv.

which it is that the author means; for his author may count from the little finger towards the thumb; or from the thumb towards the little finger; or he may have a fancy of leaving out the thumb, and reckoning only four." "What,"—adds Sir Charles,—“must be the surprise of any well educated young man, when he reads in those books, which he must, of the *regions* of the *elbow* or *thumb*, or *forefinger*? And if an anatomist understand such things with difficulty, how distressing must they be to the student.” And he concludes,—“This is the scholastic jargon, which has so long been the pride of anatomists, and the disgrace of their science, which has given young men a dislike for the most useful of all their studies, and which it is now full time to banish from our schools. These are the authors, who avoid plainness as if it were meanness; who are studious of hard words, as if they constituted the perfection of science: ‘it is their trade, it is their mystery to write obscurely;’ and full sorely does the student feel it.”

A similar difficulty is experienced by the student in the investigation of disease, from the careless use of unmeaning terms, or rather of terms, which convey no precise idea to his mind. Thus, we constantly hear of a person's being ‘bilious,’ and of an article of diet being ‘bilious;’—the idea intended to be conveyed being, that the person is dyspeptic, or the diet difficult of digestion; and as the bile has, in recent times, been esteemed the great cause of indigestion, the epithet ‘bilious’ has been thus employed. It has been properly remarked by Dr. Abercrombie,\* that “if we would

\* ‘Inquiries concerning the Intellectual Powers,’ &c. Amer. edit. p. 329.



contribute something towards diminishing the uncertainty of medical researches, and introducing a greater degree of precision into medical reasoning, there are certain rules, which we ought to keep steadily in view, both in conducting our own inquiries, and examining the investigations of others;" and that an important rule is to endeavour to have all our terms fully defined. "If we speak, for example, of a person being bilious, or laboring under biliary derangement, or derangement of the chylopoietic viscera, let it be explained what particular condition of the biliary or digestive organs we mean to express by these terms; or if this cannot be done, let it at least be clearly understood what particular symptoms we include under them." "If," he adds, "they were defined in this manner, they would be merely names, and no harm could result from the use of them, but, as they are frequently employed, they seem to have no explicit signification."

In prescribing, a mode of expression is employed, which, although conveyed in the Latin language, requires attention even on the part of those whose academic education has been properly directed. Some acquaintance with the language of prescriptions is, therefore, indispensable, should the physician, with whom the student is placed, be in the habit of having his prescriptions prepared in his own office; and, especially, if he be in the habit of writing his prescriptions, in the mode universally adopted by the physicians, and even by the apothecaries, of Great Britain. Mr. Chamberlaine\* has given the following specimen of the Prescription Book of the English apothecary, which

\* 'Tirocinium Medicum,' p. 96.

may be taken as a correct illustration of the mode in which the diary of his proceedings is usually kept.

“ *Die Lunæ, 15to Januarii, 1813.*

*Pitt, Mrs.*

Repetantur Haust.\* iij.† ut heri.

*Hewitt, Mrs.*

Repr.‡ Mistura.

Repr. Haustus anodyn. horâ somni sumendus.

*Leonard's Child.*

R—Ung.§ Cetacei ʒj.¶

Repetantur pulveres ut die Veneris ultimo præscr.”¶

The practitioner, when he returns from paying his visits, enters the prescriptions in his book, as above; and this is the guidance to the assistant or the apprentice in his office, whose duty it is to prepare, and send out, the medicines.—Mrs. Pitt is to have the three draughts as yesterday.—Mrs. Hewitt is to have a repetition of the mixture; and the anodyne draught, to be taken at bed-time, is to be repeated.—Leonard's child is to have an ounce of the ointment of spermaceti; and a repetition of the powders, prescribed last Friday.

The prescriptions of the physician are issued in a similar style, of which the following may be taken as a sample.

R.—Infus. Calumb. ʒiss.

Tinct. Gent. comp. ʒj.

Syrup. Cort. Aurant. ʒij.

Tinct. Capsie. gtt. xl. (vel m. xxx.)

Capiat coch. ij. p. r. n. M.

R. D.

1mo. Martis,

1837.

*John Smith, Esq.*

\* Haustus.

§ Unguenti.

† Tres.

¶ Unciam.

‡ Repetatur.

¶ Præscripti.

This, when written at length, will read as follows—

Recipe.—Infusi Calumbæ, sesquiunciam, (vel unciam cum semisse.)  
 Tincturæ gentianæ compositæ, drachmam;  
 Syrupi corticis Aurantiorum, drachmas duas;  
 Tincturæ Capsici, guttas quadraginta, (vel minima triginta,) Misce.  
 Capiat cochlearia duo pro re natâ.

There are several points, in these brief examples, which, to the tyro, require explanation.

In the *first* place, it will be observed, a character, bearing the appearance of the letter R, but having—what Dr. Paris has termed—a ‘*cloven* foot,’ is placed at the head of every formula. This is now—universally—a representative of the Latin word ‘*Recipe*,’ and is always so rendered. Originally, however, it was not so. It is a relic of ancient superstitions, and, like many such relics, has had its functions so modified, as to leave scarcely a vestige of its former appropriation. The symbol, in question, is the old astrological sign for Jupiter, ♃, and it was, anciently, placed at the head of the prescription, to invoke the aid of the god of thunder in its operation.

*Secondly.* It rarely happens, that the different components of a prescription have their names written at full length. Thus, we have, in the last of the prescriptions, *Infus. Calumb.*, *Tinct. Gent. comp.*, *Syrup. cort. Aurant.*, *Tinct. Capsic.*, &c. This plan has, doubtless, been adopted to save the time of the practitioner: no other good reason can be assigned for it.

There is no invariable rule adopted by prescribers in this matter. Sometimes those very articles will be written *Inf. Calumb.*; *Tinctur.* or *℞. Gentian. c.*; *Syr. cort. Aur.*; *Tinctur.* or *℞. Caps.*, &c. &c.

It has been urged against the use of abbreviations, that mistakes may arise, in consequence of the great similarity between the abridged names of certain articles; but it cannot often happen that serious risk of this kind can be incurred. If the prescriber exerts ordinary caution, the merest tyro can comprehend his directions. There are some newly introduced agents, however, which demand great care, inasmuch as they are the *active* principles of *active* remedies, and a mistake in compounding them might be followed by serious consequences. In the second edition of a translation of Magendie's "*Formulaire pour la preparation et l'emploi de plusieurs nouveaux medicamens*," by the author's friend and preceptor,—the late Charles Thomas Haden, Esq.,—the author of this work advised the ending in *ina*, in the case of several of the newly discovered active principles of vegetable substances,—inasmuch as errors would be less likely to arise, from the greater dissimilarity between the terminations of the name of the plant and its base, than when any other of the names that have been proposed are employed. Thus, the terms *Cinchonia*, *Veratria*, *Solanina*, and *Atropia* are so similar to those of the plants of which they are the bases, that if the words were abridged in a prescription, the occurrence of many mistakes might be apprehended. Besides, *Morphina*, and *Emetina*, admitted into the pharmacopœia of Paris, have been latinised according to the plan recommended.\*

\* 'Formulaire for the preparation and mode of employing several new remedies, &c.' Translated by C. T. Haden, Esq.: 2d edit., by Robley Dunglison, M. D. Lond. 1824. p. 1.—Reprinted in this country.

In another work,\* the author has given a table of the chief abbreviations that are used in medicinal formulæ. They are by no means as frequently employed at the present day as they were formerly. Of old, every article of the *materia medica* had its appropriate symbol; but the era of darkness has almost passed away, and most of the chemical, astrological and other signs are now disregarded, except as indexes of a by-gone period of ignorance and superstition.

The abbreviations, generally used at the present day, sufficiently indicate the words which they represent. We still, however, meet with a few, that require a glossary; for example, A or āā, (*ana*,) *ana* ‘of each ingredient.’ BB. *Bbds. Barbadosis*, ‘Barbadoes.’ C. C., *Cornu cervi*, ‘hartshorn.’ C. C. u., *Cornu cervi ustum*, ‘burnt hartshorn.’ C. m., *Cras mane*, ‘tomorrow morning.’ De d. in d., *De die in diem*, ‘from day to day.’ F. fiat, ‘let it be made;’ as f. pil.,—fiat pilula, ‘make into a pill.’ F. VS., *Fiat venæsectio*, ‘let bleeding be performed.’ G. g. g., *Gummi guttæ gambiæ*, ‘Gamboge.’ H.s., *Horâ somni*, ‘at the hour of sleep;’—‘at bed time.’ H. s.s., *Horâ somni sumendus*, ‘to be taken at bed time.’ M. or ~~M~~, *Misce*, ‘mix.’ N. M., *Nux moschata*, ‘nutmeg.’ Ol. s. i., *Oleum sine igne*, ‘oil, prepared without fire;’ as Ol. lini s. i., ‘cold-drawn linseed or flaxseed oil.’ O. O. o., *Oleum olivæ optimum*, ‘best olive oil.’ P., *Pondere*, ‘by weight.’ P. and Pug., *Pugillus*, ‘a pugil.’ P. æ., *Partes æquales*, ‘equal parts.’ P. P., *Pulvis Patrum*, ‘Jesuit’s bark.’ P. r. n., *pro re nata*, ‘as occasion may arise.’

\* ‘A new Dictionary of Medical Science and Literature, &c.’ Boston, 1833. p. 1.



*Q. p.*, *Quantum placeat*, ‘as much as may please.’  
*Q. s.*, *Quantum sufficiat* or *sufficit*, ‘as much as may suffice, or suffices.’ *Q. v.*, *Quantum volucris*, ‘as much as you wish.’ *S. a.*, *secundum artem*, ‘according to the rules of art.’ *S. V.*, *Spiritus vini*, ‘spirit of wine.’ *S. V. r.*, *Spiritus vini rectificatus*, ‘rectified spirit of wine.’ *S. V. t.*, *Spiritus vini tenuior*, ‘proof spirit of wine.’ *T. O.*, *Tinctura opii*, ‘tincture of opium,’ ‘laudanum.’ *TR.* and *R.*, *Tinctura*, ‘tincture.’ *V. o. s.*, *Vitello ovi solutus* ‘dissolved in the yolk of egg.’ *ZZ.*, formerly ‘myrrh,’ now *Zinziber*, ‘ginger.’

*Thirdly.* Particular hieroglyphics are usually employed to mark the quantities of the different articles in a prescription. Thus,  $\text{℥}$ , *libra*, is a pound;  $\text{℥}$ , *uncia*, an ounce;  $\text{℥}$ , *drachma*, a drachm;  $\text{℥}$ , *scrupulum*, a scruple; *gr.*, *granum*, a grain; *O.*, *octarius*, a pint. *f.*, prefixed to the symbol for the ounce and drachm, means an ounce or a drachm by measure,—‘a fluidounce,’ *fluiduncia*, or ‘fluidrachm,’ *fluidrachma*.  $\text{m}$ . signifies *minimum*, the least or sixtieth part of a fluidrachm, *gtt.*, *gutta*, ‘a drop;’ *ss.*, *scmissis*, or half; *iss.*, one and a half; *j.*, one; *ij.*, two; *ijj.*, three; *iv.*, four; *x.*, ten; *xij.*, twelve, &c. &c.

To this kind of symbolic language, great objection has been made, and not without apparent foundation. It has been affirmed, for example, that a physician’s prescription should be intelligible to all who can read, and so clear, that the nurse, who attends the sick, may know its import: that the quantities should be written in words, and not in the usual characters; for, suppose—it is urged—in the case of some powerful medicines, in the hurried way of almost all affected bad writing, in pre-

scriptions,—there should be an extra z, at the top of the symbol for a drachm; or, in other words, there should be an  $\bar{z}$  (ounce) instead of a  $z$  (drachm,)—the latter being only the eighth part of the ounce,—how fatal might be the consequences! It, doubtless, would be better, that these symbols should not be used in extemporaneous formulæ, yet a very ordinary degree of attention, on the part of the prescriber, or the compounder, will be sufficient to prevent mistakes.

As regards the weights and measures, used by the apothecary in compounding, it is only necessary to refer the student to his ‘Dispensatory.’\* The importance of possessing a uniform system of weights and measures has impressed the scientific of all countries, and numerous endeavours have been made to accomplish the object. It is, however, a matter of much difficulty, and not likely to be easily effected. The new French measures are upon decidedly the best footing, but they are not adopted out of France. They are not used, indeed, universally in it.

The weight, by which the apothecary buys his drugs, is the *avoirdupois*: that, by which he compounds, is a modification of the *troy*,—called *apothecaries’ weight*. The last two correspond with each other in pounds, ounces and grains; but they differ in the division of the ounce, which, in the troy weight, contains twenty pennyweights, each pennyweight weighing twenty-four grains; whilst, in the apothecaries’ weight, the ounce is divided into eight drachms,—each drachm into three scruples;—and each scruple into twenty grains.

\* See, also, the article ‘Pondera et Mensuræ,’ in the author’s ‘Medical Dictionary.’ Vol. II. 198.

It has been remarked above, that the French do not always employ the weights of modern introduction. They usually adhere to the *poids de marc*, which differs again from both the troy or apothecaries, and the avoirdupois. The sub-divisions, however, resemble those of the last. The relative values of the old French—the *poids de marc*, and the English or troy—are as follows:—

<i>Poids de marc.</i>		<i>Troy weight.</i>		<i>Troy grains.</i>
1 pound,	=	1.31268	=	7561.
The ounce,	=	.984504	=	472.5625
The <i>gros</i> or drachm,	=	.984504	=	59.070312
The grain,	=			.820421

<i>Troy.</i>		<i>Poids de marc.</i>		<i>French grains.</i>
1 Pound,	=	0.76180	=	7561.
The ounce,	=	1.01574	=	585.083
The drachm,	=	1.01574	=	73.135
The grain,	=			1.219

The difference between the French and the English grain has, therefore, to be borne in mind. In the case of very active remedies, the adoption of the grain troy, for the grain *poids de marc*, might be the source of inconvenience. Thus, in the 'Formulary' to which allusion has been made, the weights of the ingredients in the different formulæ are given in French grains. In that, for example, for the *Gouttes calmantes*—the '*Guttæ anodynæ*' or 'anodyne drops,' of the translation—*sixteen grains* of the acetate of morphine are directed to the *ounce* of distilled water. These, in the troy computation, are  $13\frac{1}{2}$  grains: and seven drachms,  $52\frac{1}{2}$  grains, respectively.

Again, in the *Sirop de quinine*, or 'syrup of quinine,'

the computation of the ingredients in the *poids de marc*, and the troy, is as follows:—

Simple syrup,	2 pounds (31oz. 4 dr. 2 gr. Troy.)
Sulphate of quinine,	64 grains (gr. 52.48 Troy.)

If, then, in this formula, the compounder were to read two pounds *troy*, instead of two pounds *poids de marc*, the difference would be great,—two pounds troy being 24 troy ounces, whilst two pounds, *poids de marc*, are upwards of 31½ ounces.

To convert the *poids de marc* grains into troy grains, it is but necessary to divide by 1.219; and to convert troy grains into French grains to multiply by the same.

The measures of capacity in use with the apothecary are sufficiently simple. Formerly, *libra* was used for the pint, and the symbol ℔. was adopted to express both a pound by weight, and a pint by measure. Different liquids, however, are of different specific gravity, and, therefore, the London College of Physicians suggested the term *octarius* for the pint,—*libra* being restricted to the pound by weight. In like manner, *gutta* was formerly used universally for the smallest division of the measures of capacity: but the drop varies materially in weight, as well as in dimensions, according to the nature of the fluid, and the thickness of the lip of the phial from which it may be dropped. Accordingly, the same college suggested a division of the fluid drachm into 60 equal parts, and proposed, for each of these, the name *minimum* or *minim*. Both suggestions have been embraced by the framers of the Pharmacopœia of the United States.

The gallon ( <i>Congius</i> ,)	} contains {	8 pints.
The pint ( <i>Octarius</i> ,)		16 fluidounces,
The fluidounce ( <i>fluiduncia</i> ,)		8 fluidrachms,
The fluidrachm ( <i>fluidrachma</i> ,)		60 minims.
The minim ( <i>minimum</i> ,)		

Besides these weights and measures, there are certain modes of estimating quantities of substances by approximation.

A cupful is	℥iv. or v.
A wineglassful,	℥iss. to ℥ij.
A tablespoonful,	f. ℥ss.
A coffee or dessert spoonful,	f. ℥ij.
A teaspoonful,	f. ℥j.
Pugillus, (French <i>Pincée</i> ) is as much as can be held by the three fingers.	
&c. &c.	

The following vocabulary will aid the student, not only in translating, but in writing, his prescriptions *more solito*.

#### A.

ACIDITAS, 'sharpness.' Adde succum limonis ad gratam *aciditatem*, 'add the lemon juice so as to make it agreeably acid.'

ADÆQUO, 'to be equal to.' Quod pisum *adæquat* infricandum, 'the size of a pea to be rubbed in.'

ADDE, 'add.' ADDATUR, ADDANTUR, 'let there be added;' ADDENDO, 'adding.'—Sub finem coctionis, *adde*, *addatur* vel *addantur*, *addendo*:—'towards the end of the boiling'—(as in the preparation of decoction) 'add, let there be added, or adding.'

ADMOVEATUR, ADMOVEANTUR, 'let there be applied.' *Admoveatur* epispasticum dorso:—'let a blister be applied to the back.'

ADSTANS, 'present.' Omittatur cinchona *adstante* febre. 'Omit the bark or cinchona, whilst the fever is present.'

ÆGER, ÆGRA, 'a sick person.' Habeat *Æger* vel *Ægra* Haustum anodynum. 'Let the patient have an anodyne draught.'

AGGREDIENS, 'coming on,' 'approaching.' Sumat haustum emeticum *aggrediente* febre. 'Let him have an emetic draught, when the fever is coming on.'



AGĪTO, 'to shake;' AGITATUS, 'shaken.' *Agita* phialam, 'shake the vial.' *Agitato* vase, 'the vessel being shaken.'

ALTERNUS, 'alternate,' 'every other.' Sumatur *alternis* horis, vel *alternis* diebus, 'let it be taken every second hour, or every second day.'

ALUTA, 'leather.' Extende emplastrum super *alutam* mollem, 'extend or spread the plaster on soft leather.'

ALVUS, 'the belly,' 'the bowels.' Utatur oleo ricini *alvo* adstrictâ, 'let castor oil be used, when the bowels are confined.' Donec *alvus* soluta sit, 'until the bowels are opened.'

ANIMUS, 'the mind.' *Ad defectionem animi*:—'to fainting.'

† ANTEMERIDIANUS, 'in the forenoon.' Utatur enemate horâ octavâ *antemeridianâ*, 'let the enema be used at eight o'clock in the morning.'

AQUA, 'water.' *Aqua calida*, 'warm water.' *Aqua tepida*, 'tepid water.' *Aqua frigida*, 'cold water.' *Aqua fervens*, 'hot water.' *Aqua bulliens*, 'boiling water.' *Aqua fontana*, 'spring water.' *Aqua pluvialis*, 'rain water.'

ARMATUS, 'armed,' 'provided.' *Fistula armata*, 'an armed pipe.' The prepared bag and pipe for giving clysters.

## B.

BIDUUM, 'the space of two days.' Omni *biduo*, 'every two days.'

BIHORUM, 'the space of two hours.' Sumatur omni *bihorio*, 'let it be taken every two hours.'

BINUS, 'two.' Macera per horas *binas*, 'macerate for two hours.'

BIS, 'twice.' Capiat pulverem *bis* terve, 'let him take a powder twice or thrice.'

## C.

CAPĪO, 'I take;'—as in the example just given. *Capiat* cochl. ij., 'let him take two table-spoonfuls.'

CEREVISIA, 'ale or beer.' *Cerevisia*, 'porter' dieta, *Cerevisia Londinensis*, 'porter.'

CHARTA, 'paper.' Cola trans (vel per) *chartam* bibulam, 'filter through bibulous paper.' Divide in *chartulas* vj., 'divide into six papers.' Detur ad *chartulam*, 'let the quantity in the paper be given.'

CLAUSUS, 'shut; covered.' Digère in vase *clauso*, 'digest in a covered vessel.'

COCHLEARE, 'a spoonful.' *Cochleare* magnum vel amplum, 'a table-spoonful.' *Cochleare* medium; *Cochleare* infantulorum vel infantum; *Cochleare* modicum, 'a dessert-spoonful; a child's spoonful.' *Cochleare* parvum vel parvulum, 'a tea-spoonful.'

COCTIO, 'a boiling.' Adde sub finem *coctionis*, 'add towards the end of the boiling.'

CÆNA, 'supper.' Capiat pilulam horâ ante cœnam; 'take a pill an hour before supper.'

COLO, 'I strain;' COLATUS, 'strained.' *Cola* misturam, 'strain the mixture.' Liquori *colato* adde, 'to the strained liquor add.' *Colaturæ* adde—has the same meaning.

CONCĪDO, 'I cut to pieces;' CONCĪSUS, 'cut to pieces.' *Radicibus concisis*, 'the roots being cut to pieces.'

CONTUNDO, 'I bruise;' CONTUSUS, 'bruised.' *Contunde* gummi in mortario, 'bruise the gum in a mortar. *Radicibus contūsis*, 'the roots being bruised.'

CORPUS, 'a body.' Contunde donec *corpus* sit unum, 'bruise until they are incorporated, or form one body.'

CRAS, 'to-morrow.' Sumatur *cras* mane, 'let it be taken to-morrow morning.' *Cras* vespere, 'to-morrow evening.' In usum *crastinum*, 'for to-morrow's use.'

CUCURBITULA, 'a gourd,' 'a cupping-glass;' *C. C. Cucurbitulæ* siccæ, 'dry cupping.' *Cucurbitulæ* cruentæ, (vel eum ferro,) 'cupping with the scarificator.'

CYATHUS, 'a cup, 'a eupful,' *Cyathus* vini vel vinarius, 'a wine-glass.' *Cyathus* theæ, 'a teacup.'

## D.

DECUBĪTUS, 'lying down.' Horâ *decubitus*, 'the hour of lying down;' 'bed-time.'

DEGLUTIO, 'I swallow.' *Deglutietur* bolus vespere, 'let the bolus be swallowed in the evening.'

DEJECTIO, 'a depositing;' also, 'an alvine discharge,' from DEJĪCĪO, 'I go to stool.' Post duas *dejectiones* alvi habeat enema opiatum, 'after two evacuations, let him have the opiate enema.' Repetatur catharticum donec alvus bis *dejiciat*, 'repeat the cathartic until the bowels shall respond twice.'

DIES, 'a day.' In *dies*, 'every day, daily.' Bis *die*, 'twice a

day.' Seeundis *diebus*, 'every second day.' Alternis *diebus*, 'every alternate day.' De *die*, 'in a day.' De *die in diem*, 'from day to day.'

DILUCULUM, 'daybreak.' Sumatur *dilucŭlo*, 'let it be taken at break of day.'

DIU, 'a long while.' Tere *diu*, 'rub for a long time.' *Diuturna* coctione, 'by long continued boiling.'

DO, 'to give.' *Da* pilulam statim, 'give the pill immediately;' or *Detur* pilula statim, 'let the pill be given immediately.'

DOLOR, 'pain.' Urgenti *dolŏre*, 'the pain being urgent.' Durante *dolore*, 'the pain continuing.' Applicetur cataplasma parti *dolenti*, 'apply the cataplasm to the pained part.'

## E.

EXHIBĒO, 'I exhibit.' *Exhibeātur* enema, 'let the glyster be given.' Fiat mistura ter die *exhibenda*, 'make into a mixture to be given three times a day.'

## F.

FARĪNA, 'flour,' meal.' *Farina* seminis lini, 'flaxseed meal.'

FICTĪLIS, 'earthen.' Serva in vasis *fictilibus*, 'keep in earthen vessels.'

FISTULA, 'a pipe.' See ARMATUS.

FONTICULUS, 'a little fountain,' 'an issue.' Fiat *fonticŭlus*, 'let an issue be made.'

FOTUS 'a fomentation;' from FŎVEO, 'I foment.' Utatur *lotu* aquæ ferventis, 'let him use a fomentation of hot water.' *Foveantur* partes aquâ calidâ, 'let the parts be fomented with warm water.'

FRICO, 'to rub.' *Fricētur* corpus oleo, 'let the body be rubbed with oil.'

## G.

GELATĪNA, 'jelly.' *Gelatina* ribesiorum, 'currant jelly.'

## H.'

HERI, 'yesterday;' HESTERNUS, 'belonging to yesterday.' Capiat haustum ut *heri*, 'take the draught as yesterday.' Capiat haustum ut *hesternâ* nocte, 'take the draught as last night.'

**HIRUDO**, ‘a leech.’ *Applicentur hirūdines xviiij dorso*; ‘let eighteen leeches be applied to the back.’

**HORA**, ‘an hour.’ *Horá ante cœnam*, ‘an hour before supper.’ *Horá somni*,—abbreviated, h. s. ‘at the hour of sleep.’ *Horá somni sumendus*;—abbreviated, h. s. s. ‘to be taken at the hour of sleep.’ *Horá decubitus*, ‘at bed time.’ *Horæ unius spatium*, ‘at the end of an hour.’ In *horas*, ‘every hour.’ *Horá septimâ vespertinâ* ‘at seven o’clock in the evening.’ *Horá septimâ matutinâ* ‘at seven o’clock in the morning.’ *Horæ quadrans vel pars quarta*, ‘a quarter of an hour.’ *Horis intermediis*, ‘at intermediate hours,’—as where two medicines are prescribed.

# I.

**ILLINO** or **ILLĪNIO**, ‘to anoint, or besmear gently.’ *Illinere unguento oculis*, ‘to anoint the eyes with ointment.’ *Oculos sanare illitû*, ‘to cure the eyes by anointing.’

**IMPŌNO**, ‘I place on.’ *Imponatur emplastrum lateri*, ‘let the plaster be put on the side.’

**INCĪDO**, ‘I cut;’ **INCĪSUS**, ‘cut.’ *Radicibus incisis adde*, ‘to the cut roots add.’

**INJICĒO**, ‘I inject.’ *Injiciatur enema*, ‘let the glyster be injected.’ *Fiat enema statim injiciendum*, ‘make into an enema, to be injected immediately.’

**INSTAR**, ‘bigness.’ *Sumat molem instar nucis avellanæ*, ‘let him take the bigness of a hazel nut.’

**INTERNUS**, ‘internal.’ *Applicentur sinapismata internis femoribus*, ‘let sinapisms be applied to the interior of the thighs.’

# J.

**JENTACULUM**, ‘breakfast.’ *Sumatur pulvis horis binis ante jentaculum*, ‘let the powder be taken two hours before breakfast.’

**JUS**, **JUSCULUM**, ‘broth.’ *Jusculum ovillum*, ‘mutton broth.’ *Jus vitulinum*, ‘veal broth.’ *Jus bovīnum*, ‘beef tea.’

# L.

**LANULA**, ‘flannel,’ from *Lana*, ‘wool.’ *Utatur lanulâ novâ*, ‘let new flannel be used.’

**LANGUOR**, ‘faintness.’ *Capiat misturam in languoribus*, ‘let the mixture be taken when faint.’

LATUS, 'the side.' Admoveatur vesicatorium *latèri* dolenti, 'let a blister be applied to the pained side.'

LIBITUM, 'one's will, and liking.' Bibat potum bitartratis potassæ ad *libitum*, 'let him take the drink of bitartrate of potassa at pleasure.'

LIQUESCO, 'to liquify, melt;' also LIQUO. Donec *liquescat*, 'until it melts.' *Liqua* simul, 'melt together.'

## M.

MANE, 'in the morning.' Primo *manè*, and valdè *manè*, 'early in the morning.' Cras *manè*, 'to-morrow morning.' *Matutīnus*, 'belonging to the morning or forenoon;' as Horâ undecimâ *motutinâ*, at 'eleven in the morning.'

MEDIUS, 'middle;' as *mediâ* nocte, 'in the middle of the night.'

MINOR, 'to threaten.' Capiat cinchona *minante* paroxysmo, 'let the cinchona be taken—the paroxysm threatening.'

MITTO, 'to send.' *Mitte* chartas sex; vel *mittantur* chartæ sex, 'send six papers;' or, let six papers be sent.' *Mittatur* sanguis ad uncias duodecim, 'let blood be lost to twelve ounces.'

MODUS, 'a manner.' Sumantur pilulæ *modo* præscripto, 'let the pills be taken in the manner prescribed.'

MOLES, 'a mass;' 'a piece.' Sumat *molem* instar nucis moschatae, 'let him take a piece the size of a nutmeg.'

MOLESTUS, 'troublesome.' *Molestante* dolore capiat, &c., 'the pain being troublesome, let him take.' *Molestante* tussi, 'the cough being troublesome.'

MORA, 'delay.' Mittatur sanguis, sine *morâ*, 'let blood be drawn without delay.'

MORTARIUM, 'a mortar.' *Mortarium* aliēneum, 'a brass mortar.' *Mortarium* marmoreum, 'a marble mortar.' *Mortarium* vitreum, 'a glass mortar.'

MOS, 'manner.' Utatur gargarismate *more* solito, 'let the gargle be used in the wonted manner.'

## N.

NARTHECIUM, 'a gallipot.'

NOX, 'night.' Sumatur *nocte*, vel *nocte* manèque, vel alternis *noctibus*, 'let it be taken at night, or day and night; or every other night.'

NUCIA, 'the nape of the neck.' Applicetur moxa *nuchæ*, 'let moxa be applied to the nape of the neck.'



## O.

OBSTANS, 'hindering,' 'opposing.' Utatur einchonâ paroxysmo non *obstante*, 'let the bark be used, the paroxysm not preventing.'

OBTURO, 'to stop up;' OBTURATUS, 'stopped up.' Serva in vase bene *obturato*, 'keep in a vessel well stopped.'

OLLA, 'a pot;' also, 'a gallipot.'

OVUM, 'an egg.' Albūmen *ovi*, 'the white of egg.' Vitellus *ovi*, 'the yolk of egg.'

## P.

PANNUS, 'a cloth.' *Pannus* linteus, 'a linen rag or cloth.' *Pannus* laneus; *Pannus* e lanâ vel lanulâ, 'a flannel cloth.' Foveantur partes aquâ servente ope *panni* lanei, 'let the parts be fomented with hot water by means of flannel.'

PENDO, 'to weigh.' *Pensus*, 'weighed.' Recipe strychninæ, accurate *pensæ*, &c. 'take of strychnine, accurately weighed.' &c.

PERGO, 'to go on; to continue.' Pergat in usu medicaminum, 'continue in the use of the medicines.'

PERAGO, 'to finish;' PERACTUS, 'finished.' *Peracta* operatione emetici, 'the action of the emetic being finished.'

PERFRICO, 'to rub.' *Perfricentur* partes affectæ linimento præscripto, 'let the affected parts be rubbed with the prescribed liniment.'

POMERIDIANUS, POSTMERIDIANUS, 'belonging to the afternoon;' as horâ primâ *pomeridianâ*, 'at one in the afternoon.'

POTUS, 'drink.' Habeat solutum bitartratis potassæ pro *potu* communi, 'let him have the solution of cream of tartar for common drink.'

PRANDIUM, 'dinner.' Sumatur pilula horâ ante *prandium*, 'let the pill be taken an hour before dinner.'

PRO RE NATA; abridged *p. r. n.* 'as occasion may require.'

PULMENTUM, 'gruel.' Capiat pulverem in *pulmento*, 'let the powder be taken in gruel.'

PYXIS, genitive Pyxid̄is, 'a pill-box;' 'a lozenge box.'

## Q.

QUAMPRIMUM, 'as soon as possible.' Adhibeatur enema *quampri-*  
*mum*, 'let the injection be given as soon as possible.'

QUIVIS, 'any one.' Sumatur *quovis* vehiculo, 'let it be taken in any vehicle.'

QUIESCO, 'to go to rest;' 'to become easy;' as, continetur remedium donec *quiescat*, 'continue the remedy until he grows easy.'

QUANTUM SUFFICIT, 'as much as is sufficient;' often abridged *q. s.*

## R.

RATIO, 'a proportion.' Pro *ratione* ætatis, 'according to the age.' Pro *ratione* doloris, 'according to the urgency of the pain.'

RECIDIVUS, 'relapsing;' 'ad *recidivum* præcavendum, to prevent a relapse.'

REGIO, 'a region.' 'Applicetur *regiōni* epigastricæ; *regioni* lumborum, *Regiōni* umbilicali, &c., 'let it be applied to the epigastric region, the lumbar region, the umbilical region, &c.'

REDĪGO, 'to reduce;' REDACTUS, 'reduced.' *Redige* vel *redigatur* in pulverem, 'reduce, or let it be reduced into powder.' In pulverem *reductum*, 'reduced into powder.'

REPĒTO, 'to repeat.' *Repete* vel *repetantur* remedia, 'repeat the medicines, or let them be repeated.'

RESPONDEO, 'to answer.' Donec alvus bene *responderit*, 'until the bowels have well responded.'

## S.

SEDES, 'an evacuation by the bowels.' Capiat anodynum post singulas *sedes* liquidas, 'take the anodyne after every liquid evacuation.'

SERUM, SERUM LACTIS, 'whey.' Sumatur in *sero* lactis vinoso, 'in wine whey.'

SINGULUS, 'each.' Pulveris jalapæ, hydrargyri submuriatis, *singulorum* (vel ana) grana quinque, 'of powdered jalap and calomel, each five grains.'

SOLUTUS, 'dissolved,' loosened.' Donec alvus *solūta* fuerit, 'until the bowels be opened.'

SPISSITAS, 'thickness.' SPISSUS, 'thick.' Sumatur hydrargyri submuriatis in quovis vehiculo *spisso*, 'let the calomel be taken in some thick vehicle.' Coque ad debitam *spissitatem*, 'boil to the proper consistence.'

STUPA, 'tow.' Involvantur partes in *stupa*, 'let the parts be wrapped in tow.'

SUB, 'under;' prefixed to many words, has the signification of the

English termination *ish*. *Subniger*, 'blackish.' *Subtepidus*, 'warmish.' *Subacutus*, 'acutish, &c.

*SUBIGO*, 'to subdue,' 'to dissolve,' 'to cause to unite.' *Subige hydrargyrum adipe*, 'subdue the mercury with lard.' *Hydrargyro subacto*, 'the mercury being subdued.'

*SUBTILIS*, 'subtile,' 'reduced to fine powder.' *Pulvis subtilissimus*, 'the very finest powder.'

*SUMO*, 'to take.' *Sumat æger pilulas duas*, 'let the patient take two pills.' *Sumatur*, 'let it be taken.'

*SUPERBIBO*, 'to drink after.' *Post emetieum superbibat infusum anthemidis*, 'after the emetic, let him drink chamomile tea.'

## T

*TEMPUS*, genitive *TEMPORIS*, 'time,' 'the temple.' *Applicetur lotio tempori dextro*, 'let the lotion be applied to the right temple.'

*TERO*, 'to rub;' *TRITUS*, 'rubbed.' *Tere simul*, 'rub together.' *Simul triti*, 'rubbed or ground together.'

*TRIDUUM*, 'the space of three days.' *Omni triduo*, 'every three days.'

## U.

*ULTIMŌ*, 'last.' *Continuetur potio ultimo præscripta*, 'let the potion, last prescribed, be continued.'

*URGEŌ*, 'to urge,' 'to be troublesome.' *Urgenti dolore*, 'the pain being troublesome.'

*USQUE AD*, 'up to,' 'as far as.' *Pergat in uso antimonii usque ad nauseam*, 'continue the use of the antimony until it induces nausea.'

## V.

*VALEO*, 'to avail.' *Repete catharticum si non valeat*, 'repeat the cathartic, if it does not answer.'

*VEHICULUM*, 'a vehicle,' 'that in which a medicine is taken.' *Sumatur in quovis vehicūlo*, 'let it be taken in any vehicle.'

*VESPERE*, 'in the evening.' *VESPERTINUS*, 'belonging to the evening.' *Repetatur haustus vespere;—horâ sextâ vespertinâ*, 'let the draught be repeated in the evening;—at six o'clock in the evening.'

*VICES*, 'turns.' *Ad duas vices sumendus*, 'to be taken at twice.' *Partitis vicibus*, 'in divided or broken doses.'

We come now to the question:—what subjects the office-student should peruse during his first year, and before he has commenced his attendance on lectures? Generally, on this point, the preceptor gives himself but little trouble. The youth is received into the office: the books,—few or many as the case may be—are placed at his disposal, and he is left to his own discretion—which may be a negative quantity—as to the topics he shall peruse. Under such circumstances, it will almost always happen, that those subjects, which minister most to his curiosity, and which are, therefore, the least dry, will first attract his attention, and a discursive habit may, in this manner, be acquired, which may shed its injurious influence over his subsequent career.

In other cases, a ‘Dispensatory’ is placed in his hands; the greater part of which he necessarily finds it impossible to comprehend, in consequence of the perpetual recurrence of terms belonging to the natural sciences, and indeed of explanations, by no means demanded in a work, which is strictly devoted to the *materia medica*. In the very first article, for example, of his Dispensatory, he finds ‘*ACACIÆ GUMMI*,’ gum arabic; the concrete juice of the *Acacia vera*, which is said to be in the class *Polygamia*; order *monœcia*, of Linnæus; *monadelphina polyandria*, of Persoon; and of the natural order *Leguminosæ*, of Jussieu. The general characters are described to be ‘*HERMAPHRODITE*; *Calyx*, five-toothed: *Corolla*, five-cleft or formed of five petals. *Stamens*, 4—100: *Pistil*, one. *Legume*, bivalve. *MALE*, *Calyx*, five-toothed. *Corolla*, five-cleft, or formed of five petals. *Stamens* 4—100.’

Again; if he turns to the *CANTHARIS* or ‘Spanish

fly,' he finds it is in the class *Insecta*; order *Coleoptera*; formerly, *Trachelides*; tribe *Cantharidæ*, of Latreille; and that its *general characters* are; "*Tarsi*, entire—*nails*, bifid; head not produced into a rostrum; *elytræ* flexible, covering the whole abdomen, linear, semicylindric; *wings* perfect; *maxillæ* with two membranaceous laciniae, the external one acute within, subuncinate; antennæ longer than the head and thorax, rectilinear; first joint largest, the second transverse, very short; *maxillary palpi* larger at tip. *Say*."——All of which must necessarily be impenetrable to one, whose attention has not been largely directed to the study of the natural sciences,—and such is the case with almost every medical student.

"The extent and nature of the subject" (*Materia medica*)—says a recent writer\*—"has been too little considered, and the preliminary acquisitions, requisite for its proper acquirement, most unaccountably overlooked, in the course of studies prescribed by the incorporated medical bodies in this country (England). Instead of commencing his medical education, by attending lectures on *materia medica*, which is an obligation imposed upon him by the existing regulations, the student should previously attend, at least, one course of Natural History, Botany, Chemistry, Anatomy, and Physiology: and not till then can he be expected to comprehend the doctrines delivered in a course of *materia medica*, far less those relating to Therapeutics."

In accordance with those views, Dr. Thomson has endeavoured to incorporate into his work everything,

\* Professor A. T. Thomson, in 'Elements of Materia Medica and Therapeutics,' 1st. edit. vol i. preface.



that can be regarded as elucidative of the subject, from the domains of Natural History, Botany, Chemistry, Anatomy, Physiology, and indeed of every department of the science. It is obvious, that there may be some advantage in this plan; but, if it were followed throughout, works, professing to be on isolated branches, would cease to be confined to them, and details would be introduced, which would necessarily add largely to the expense of such productions, and which might readily be found elsewhere: in this way, endless repetition would be indulged without any equivalent advantage.

As, too, the medical schools—of this continent especially—are constituted, it would not be an easy matter to carry into effect the recommendation of Professor Thomson, were it eminently desirable. Fortunately, the evil is not as great as has been represented. It would, doubtless, be well, that the physician should know the natural history of the animal whence he obtains his castor, his musk, &c., and that he should be acquainted with the botanical relations of the plants, whose preparations he prescribes: but such a knowledge is no more *indispensable*, than Greek is to an acquaintance with medical Technology. The argument may, indeed, be extended to the consumer of the products of the animal and vegetable kingdom as articles of diet. It would be well for him, no doubt, to be acquainted with the natural history of the ox, the sheep, the hog, &c., whence he derives his sustenance; yet, notwithstanding his ignorance on this point, universal experience demonstrates, that he has no difficulty in appropriating them to his dietetic necessities.

“The different professions”—observes a recent learn-

ed author\*—"have one way of glorifying themselves, which is common to all. It is by setting forth a vast array of preparatory studies, and pretending they are indispensable in order to fit a man for the simple exercise of the practical duties that belong to them. I have heard lawyers make such a mighty parade of the things, which a man must know before he is called to the bar, that, according to the average of human capacities, not one in fifty has the smallest chance of mastering them; and of those who do master them, not one in fifty can employ them to the uses for which they are intended. I once saw a list of books recommended by a professor of divinity to the study of those going into holy orders. They were more numerous than the majority of even studious men ever read in their whole lives; yet these were a few prolegomena introductory to the office of a parish priest. We, too, conceive that it befits our dignity to magnify ourselves at certain seasons. The commencement of a session is usually the time chosen; and then, what a croud of wonderful things are marshalled by authority around the entrance of our profession! And through this croud, it is implied every man must press his way before he can obtain admission. As if we wished to guard and garrison ourselves against invaders, rather than to gain good and useful confederates! In the affair of literature are reckoned Latin, and Greek, and French, and Italian, and German. In the affair of science, mathematics, and metaphysics, and mechanics, and optics, and hydraulics, and pneumatics,

\* "Lectures on subjects connected with Clinical Medicine." By P. M. Latham, M. D., Fellow of the Royal College of Physicians, &c. Lond. 1836. p. 9 and 22.

mineralogy, botany, zoology, and geology. Such are the portentous forms that guard the threshold. But farther onward are placed anatomy human and comparative, and morbid; physiology and pathology; chemistry, general and pharmaceutical, and *materia medica*; surgery, theoretical, clinical, operative, and ophthalmical; medicine, theoretical, clinical, obstetrical, and forensical. The general display of objects so grand and multifarious is formidable enough; but not half so formidable as their representation in detail. Of the great cosmogony of medicine there are several departments, and each professor never fails to magnify his own, by counting the cost of time and labor, which you must be prepared to bestow, if you wish to make any progress in it. "Haller (perhaps such an one will say) surely knew what anatomy is, and how much goes to make an anatomist; and Haller has estimated the cost at twenty years of time and labour."

"Now, I am persuaded that there does not exist at this day in the profession an individual who comes up to this standard, which (it is implied) all ought to reach.

\*            \*            \*            \*            \*

If all medical students had fifteen or twenty years at their disposal, and could dedicate them all to professional education, we might pardon a little innocent declamation in displaying the rich and varied field of knowledge about to be disclosed to them, but even then, sober truth would compel us to confess, that the field so pompously displayed far excelled in extent what the best minds could hope to compass, even in fifteen or twenty years. When, however, we recollect what space of time the majority of men so addressed really can give to their education, the whole affair becomes inexpressibly ludicrous. Now I do protest,

in the name of common sense, against all such proceeding as this. It is all very fine to insist that the eye cannot be understood without a knowledge of optics, nor the circulation without hydraulics, nor the bones and muscles without mechanics: that metaphysics may have their use in leading us through the intricate functions of the nervous system, and the mysterious connection of mind and matter. It is a truth; and it is a truth, also, that the whole circle of the sciences is required to comprehend a single particle of matter: but the most solemn truth of all is, *that the life of man is threescore years and ten.* "You may recommend," he subsequently remarks, "that every man, before he enters upon the study of physic, should obtain the best general education within his reach; but you must specify nothing as absolutely necessary but what bears immediately upon professional use."

It is not in its relation to *materia medica*, that the study of natural history ought to be esteemed most important. As physiology investigates the nature and functions of all living bodies, it is, necessarily, intimately associated with natural history. It is, indeed, indebted to this branch of physics, more, perhaps, than to any other. A comparative view of the various gradations amongst organised beings, has taught us to appreciate the nature of the several functions, that characterise vitality; and has demonstrated, that in proportion as the structure is more complex the functions are more numerous and perfect. Repeated observations, and multiplied experiments, on various tribes of animated nature, have elucidated many doubtful and obscure phenomena in the economy of man; and a continuation of this method of research promises to place physiology



on the firm basis of rational experience; and to enable us to reason—where only we can reason with safety—by a deduction from facts. The more numerous these facts, and the more satisfactory their arrangement, the more extensive and the more secure will be the foundation they afford for physiological conclusions.

Botany might seem to be of much more service to the physician than zoology, inasmuch as so many of our remedies are derived from the vegetable kingdom. At one time, indeed, nothing but ‘galenicals,’ as they were termed, were employed, and these were mainly of vegetable origin. We can imagine the importance of an acquaintance with the botanical characters of different vegetables, should destiny cast the physician on some unknown shore, where the sole sustenance may have to be derived from the vegetable kingdom, and where hundreds, perhaps, may have to be guided to a knowledge of the innoxious and the noxious, by his decision. It might happen, too, that the physician, may be so situated, as to be unable to procure those indigenous productions, which are usually selected so carefully by the professed herbalist, as to render it less necessary that they should be culled by him. In such case, his botanic knowledge would be called into play. Still, these are rare emergencies, on account of the facility, with which articles of merchandise can be transported every where; and, as the preparation of medicinal productions constitutes a distinct calling, the physician is generally in the habit of depending upon the apothecary,—who gets them from the herbalist,—for his supplies.

It is of more practical importance, that the physician should know the genuineness of every article



that comes to him;—a knowledge, which observation—rather than Botany—gives him. Still, like every branch of the tree of knowledge, phytology and the natural sciences in general have a tendency to expand the mind, and to react upon trains of thought, with which they do not, at first, appear to be intimately associated.

In but few of the medical schools of this continent, is botany or natural history made a distinct branch of medical education. The period of the year, at which medical instruction is chiefly conveyed, is unfavorable to botanical exercises; but the seasons of Spring, Summer, and Autumn, are well adapted,—especially the first, when all Nature smiles; and

“From the meadow to the wither’d hill,  
Led by the breeze, the vivid verdure runs,  
And swells, and deepens; and the juicy groves  
Put forth their buds, unfolding by degrees,  
Till the whole leafy forest stands display’d,  
In full luxuriance, to the sighing gales.”

At these seasons, the student cannot do better—should his opportunities, whilst in the office of his preceptor, permit—than make himself acquainted practically with botany—both by study and observation in the fields; and should he be unable to become a good zoologist,—so far as regards a knowledge of the generic and specific characters of animals,—he can, at least, acquire a knowledge of the ‘philosophy of zoology;’—one of the most interesting of the applications of natural science, and one that throws important light on the functions of the human body. It embraces, indeed, the physiology of animals, every topic of which elucidates that of man.

During the first year of office study, *full* benefit cannot accrue from the perusal of works on any of the branches of medical science. Perhaps, the most proper to be placed in the student's hands would be a treatise on physiology, which contains sufficient anatomy to enable him to acquire the terms, and to have a general idea of the structure and functions of the different parts of the organism. If he possess but a slight acquaintance with chemistry, general anatomy or the anatomy of the textures can be studied, at this period, almost as well as at any other.

The knowledge, which the student attains of his profession during the first year of his application, in an office, will necessarily be mainly restricted to the subjects that have been expatiated upon. He will, then, be enabled to enter upon his collegiate attendance with every advantage.

### CHAPTER III.

#### MEDICAL EDUCATION DURING THE PERIOD OF ATTENDANCE ON LECTURES.

THE regulations of almost every medical college in the Union require, that the student shall have attended two full courses of the lectures delivered therein, before he is permitted to offer himself for graduation. In the schools of Philadelphia, until recently, the following subjects constituted the curriculum:

1. Anatomy.
2. Theory and Practice of Physic.
3. Materia Medica and Pharmacy.
4. Chemistry.
5. Surgery.
6. Midwifery and the Diseases of Women and Children.

Of late, in the University of Pennsylvania, the department of Institutes of Medicine—a term of somewhat indefinite meaning, but generally understood to comprise, the general physiological, pathological, hygienic and therapeutical relations of medicine—has been separated from the chair of Theory and Practice, and erected into a separate professorship; and, still more recently, in the Jefferson Medical College, a chair of the Institutes of Medicine and Medical Juris-

prudence has been created, to which the author was appointed.

In the University of Maryland, the curriculum of studies is as follows:

1. Anatomy and Physiology.
2. Pathology, and Practice of Medicine.
3. Materia Medica, Therapeutics, Hygiène, and Medical Jurisprudence.
4. Chemistry and Pharmacy.
5. Principles and Practice of Surgery.
6. Obstetrics, and the Diseases of Women and Children.\*

It is expected, too, in the different schools—and occasionally required—that the candidate for the *summi honores* shall have attended the clinical course, and practical anatomy in the dissecting room, for one session at least.

It is obvious, that if the circumstances of the student will only enable him to attend the collegiate exercises during two sessions, there is no opportunity afforded him for the selection of subjects for study, in the order of time. He is compelled to attend to all, and to exhibit his qualifications in all, at the expiration of the second session, when he presents himself as a candidate for graduation. If, however, he is enabled to devote three years to his attendance on lectures, it may admit of a moment's question, as to the departments to which his attention should be mainly—if not exclusively—directed during the first year.

\* For an account of the curriculum of study in different medical colleges of the Union, see the Appendix.

The common feeling is, that he should confine himself to attendance on the lectures on anatomy and chemistry;—and the view is, perhaps, judicious. These departments are introductory to the rest, and an acquaintance with them facilitates the labors of the student in his after attendance.

It would certainly be advisable, that a course of lectures on anatomy should be followed, before practical anatomy is prosecuted,—upon the principle, that it is well for a traveller to possess some knowledge of the geography, names, &c. of a district, before he undertakes a journey through it; but, as the first of the three years' study—conducted in the manner advised—is comparatively one of leisure, it may admit of dispute, whether a larger amount of positive benefit might not accrue to the student, from a prosecution of his anatomical pursuits *practically* in the dissecting room, even during a first year's attendance upon lectures.

Again, it has been maintained by some, that from the very outset of his career of professional inquiry, the student should follow the professor through the wards of an hospital. “Physicians,” says a modern writer on this subject, “are not agreed as to the period at which the pupil should commence his attention to clinical medicine. I am firmly convinced, that he should do so from the first day of his studies. The art of healing, like every art, is acquired essentially by practice. To teach pathology to a man who has never seen disease is to weary his attention without the slightest profit. The objects, which have to be treated, are as yet devoid of existence to him. What can be understood of the theory of inflammation and of supuration, by one, who has neither seen phlegmon nor



ulcer? He must commence, therefore, by the empirical observation of facts. The theoretical explanation of those facts, and their systematic co-ordination must come afterwards to constitute the science. The pupil will not at first comprehend what the clinical professor may say, but he will assist himself by a dictionary of medical terms, and he can besides consult such of his fellow pupils as are more advanced than himself.”\*

The different departments of medical science are, in truth, so dovetailed into each other—so mutually dependent—that hesitation may exist as to those, which ought to be selected in the way of priority. Still, it must be better for the student to postpone the practical examination of cases, until he has obtained some of that preliminary instruction, which—as we have seen—is so important to the anatomist before he commences the dissection of the subject. By a sedulous attendance on a single course of the lectures delivered in a medical school, he attains this instruction; and, during his second year, he is enabled to reap all the advantage from clinical observation, which it is capable of affording him.

The difficulty of selecting the departments for a first year’s employment, where the student has three years at his disposal, has led some to advise, that he should attend a full course during the first and second years; and—as according to the regulations of the different medical institutions, he is free to the lectures after he has attended two courses—that he should select, during the third year, those departments in which

\* VAIDY, Art. *Méthodologie médicale*, in *Diction. des Sciences Médicales*.

he is most deficient, or to which his attention ought especially to be directed.

Perhaps, on the whole, this is the wisest course; inasmuch as, during the third year, he is better able to seize on all the valuable information, which an attention to medical and surgical clinics cannot fail to present to him. He is situated, indeed, during this third year, like the majority of the young graduates, who commence the practice of their profession;—by far the greater number of those, who attain the *summi honores*, having had no opportunity of following collegiate instruction longer than two sessions.

The mode to be pursued by those whose opportunities are so restricted—for attaining the greatest amount of good—forms an interesting topic of inquiry, and is the proper subject of ‘Medical Methodology.’

At the very commencement of his attendance upon lectures, the student is apt to conceive, that, in the multiplicity of subjects to which his attention is necessarily directed through the day, it is impossible for him to succeed, and he is often disposed to relinquish the study in despair. Fortunately, however, it rarely happens, that this disposition is carried into effect, before he finds, that his mind is every day expanding; that the truths of science become more and more intelligible; the memory more retentive, and the labor, therefore, largely diminished. Despair now vanishes, and hope—“the glad ray, glanc’d from eternal good,”—cheers him on his course, until he vanquishes all obstacles, and attains that goal, which has been the source of his loftiest aspirations.

In a previous chapter, a few—a very few—examples were given,—selected from a host of professional

worthies, now no more,—with the view of showing what zeal and enthusiasm in the pursuit of knowledge are capable of effecting; and what honor and reputation may be acquired, by time well spent, not only whilst in the preparatory study of the profession, but during its active exercise. Yet, to attain the high degree of eminence of any one of the scientific individuals instanced requires, on the part of the student, rather, that the time passed in reflection should be well spent, than that it should be long protracted.

Attempts have been made, by such men as Lord Coke, and the leviathan of English literature—Dr. Samuel Johnson—to fix the time, that may be daily employed in study with advantage; but, although the latter affirms, that “a young man should read five hours a day, and so may acquire a great deal of knowledge”—he properly adds, that “a man ought to read just as inclination leads him; for what he reads as a task will do him little good.” “Idleness,” he says, “is a disease, that must be combated; but I would not advise a rigid adherence to a particular plan of study. I myself have never persisted in any plan for two days together.” Fortunately, for the medical student, it happens, that there is ample choice of subjects in the interesting science he has embraced, so that he need never be at a loss for variety, and when one palls temporarily on the mind, it can be replaced with facility by another.

The estimate of the proper daily duration of study, made by these illustrious individuals, is scarcely, however, applicable to the medical student. The necessary attendance upon lectures keeps,—or ought to keep,—his mind engaged for at least six or seven

hours in the day, and renders application at his desk or his books much less necessary than in the case of the student of law, who must derive all his information from written authorities.\* It is, moreover, the business of the medical professor to lighten the labors of the student. It is for him to collect and condense the existing knowledge of the subject he teaches, to explain away difficulties, and to suggest materials for reflection—trains of thought—that may tend to expand the minds of his hearers; but this reflection and these trains of thought ought to accompany the well devised lecture, and the chief labor of the evening should be, to embody the information, that has been acquired through the day, and to investigate the facts and arguments on which it reposes. The period for more extensive reading succeeds to the collegiate career. It is then a luxury, on which the well constituted mind hastens to banquet, and which it never cloy.

At the commencement of his attendance upon lectures, the student always experiences more or less difficulty in so employing his time, after the labors of the day are over, as to reap the greatest possible benefit. He is apt to fly from one subject of thought to another without settling down upon any; and their multiplicity confounds him, so that he concludes they are invincible. Let him, however, take them calmly, and in regular detail for a few weeks, and he will be astonished at the facility with which he stores away that, which once seemed to him so formi-

\* In other words, in following a course on law—as usually conducted, and as meant by Lord Coke—the student himself is presumed to *read* for that number of hours; whilst, in following a course on medicine, he is lectured or *read to*.



dable. The excuse of want of time is rarely valid; and he who avails himself of it, if he examines his conduct, will discover, that it is not the *want* of time, but time *misspent*, which he has to deplore. He may be occupied from morning till night; but like as solitude—a “populous solitude”—may exist in cities—“midst the crowd, the hum, the shock of men,”—so may idleness be conspicuous in the midst of apparent occupation. The man, who has been accustomed to spend a certain number of hours in a given employment, will while away the same time should his business be reduced one half, and yet he may believe himself equally engaged, and would spurn the appellation of ‘idler.’ In like manner, we may be seemingly busy in confirming truths well established, and in upsetting positions, by common consent abandoned: we may employ ourselves in scientific experiments, which may not add one solitary idea to those universally received; may desire to be regarded as industrious promoters of science, and be shocked to be thought mere *idlers*. Yet, if we examine—as utilitarians—into the results of our labours, we cannot, or ought not, to cavil at the judgment. “Amongst those,” says Dr. Samuel Johnson, “whom I never could persuade to rank themselves with *idlers*, and who speak, with indignation, of my morning sleeps, and nocturnal rambles, one passes the day in catching spiders, that he may count their eyes with a microscope; another erects his head, and exhibits the dust of a marigold, separated from the flower with a dexterity worthy of a Leeuenhoeck himself. Some turn the wheel of electricity; some suspend rings to a loadstone, and find that what they did yesterday, they can do again to-day; some register the changes



of the wind, and die fully convinced, that the wind is changeable. There are men yet more profound, who have heard, that two colorless liquors may produce a color by union, and that two cold bodies will grow hot if they are mingled: they mingle them, and produce the effect expected; say it is strange, and mingle them again."

In the way to study,—as in the way to wealth,—fractions must not be disregarded. It is a trite, but a wise, maxim,—that if we take care of the pence, the pounds will take care of themselves; and the parody is no less just,—that if we take care of the minutes, the hours will take care of themselves also. It is surprising what may be accomplished by seizing upon every interval for study, and by disciplining the mind to the effective exercise of its powers. If the student succeed in this, but little nocturnal application will be necessary to treasure up the materials of science, whilst if he commences with attempting too much,—like the improvident racer, who puts forth his full strength at the onset,—he may find himself distanced by competitors, who have been more prudent of their forces, and yet, who may not excel him in abilities. In the one case, too, he incurs the risk of injuring his health by collateral irregularities; whilst, in the other, study becomes—not a toil but a pleasure. He has "a time for all things," and if a portion of that time be employed in recalling, and investigating the knowledge daily derived from his instructors, and in deducing the lessons of wisdom from such knowledge, it will be well spent. There is, indeed, a wide distinction between knowledge and wisdom,\* although a certain

\* Latham *op. citat.*, p. 20.

portion of the former may be necessary to the latter,—a distinction which has been well pointed out by the great moral poet of modern times, and should be ever present to the mind of the student.

“ Knowledge and wisdom, far from being one,  
Have oft’ times no connection. Knowledge dwells  
In heads replete with thoughts of other men;  
Wisdom in minds attentive to their own.  
Knowledge—a rude unprofitable mass,  
The mere materials with which wisdom builds,  
Till smooth’d, and squar’d, and fitted to its place,  
Does but encumber whom it seems to enrich.  
Knowledge is proud, that he has learnt so much;  
Wisdom is humble, that he knows no more.”\*

In striving to reach the temple of science,—situated, as it is, at a giddy elevation,—the youthful aspirant will find the path often skirted with the fairest flowers, but occasionally sterile and cheerless, as it passes through the different zones of vegetation. Yet, by judicious perseverance, he will surmount, in succession, the “hills on hills and Alps on Alps,” until he ultimately attains the summit of his wishes, and from the magnificent portals of the temple is enabled to dispense health and consolation to the afflicted, and to look back, with pride and satisfaction, on the steadiness of purpose, which has enabled him to overcome the toils and the difficulties of the ascent.

As aids to memory, whilst the student is attending lectures, some are in favor of his taking copious notes. To this course there are weighty objections as regards students of every standing, but, *a fortiori*, as

\* Cowper’s Task, 16., vi.

respects the junior. Whilst the student is endeavoring to record one fact, or one train of reasoning, of importance, a number may escape him; and every one, who has had experience in this matter, knows, that it requires an education to enable the student to seize upon the prominent points of a discourse. It is said, that at an inspection of a respectable college in England, and in the class of chemistry, conducted by an accomplished and excellent professor, the committee had the curiosity to look at the notes taken by one student, when they discovered, that the only point he had noted was,—that “water will freeze.” This was not, necessarily, an evidence of defective intelligence on the part of the student; it might have been mainly owing to his having begun to take notes at too early a period of his collegiate attendance, and before he could discriminate, and lay hold of the most prominent subjects.

Catchwords, or short sentences, written down at the time they are delivered, or afterwards, so as to attract the attention of the student, when he reconsiders the events of the day, may be advantageously used from the very commencement of attendance upon lectures; but no attempt should be made to record every thing, that the professor says. Such a course always interferes with the due exercise of the memory, and with after reflection, independently of other disadvantages that attend it.

Another objectionable plan—which prevails more largely perhaps than the one just animadverted upon—is that of attempting, before retiring to rest, to read over all the subjects on which the various professors have lectured during the day, in the pages of some

text book, or approved author. According to the common course in our medical colleges, six or seven hours of the day are devoted to lectures; one to hospital attendance; and, occasionally, one to clinical lectures, besides the time, that is occupied in the department of practical anatomy. This, of itself, is sufficient daily employment for the student, if the time be well spent. If he has carefully followed the professor in the statement of facts and arguments, his mind must have been kept upon the stretch for almost as long a period as it can be engaged profitably. He should not attempt to devour more intellectual aliment than he can well dispose of. Let him rather digest that which he has received through the day, and refer to his books, should his memory or reflection fail to serve him adequately upon any topic. The time for examining and reconciling conflicting opinions must occur at a future period. It should be postponed until there is sufficient leisure for the inquiry.

The author has had extensive experience on this point, and he has no hesitation in affirming, that those students, who have followed the plan here recommended, have risen pre-eminently above such of their fellow students, as have appeared to be situated alike in other respects, but have pursued the objectionable course of attempting to cram the mind with more than it is capable of receiving,—or of assimilating, if received.

All the studies, which, by common consent, form the curriculum in our medical schools, are of essential importance. They ought, indeed, to be esteemed to merit equally the devoted attention of the student. The very fact, that they are prescribed, ought to be enough

with him, and no comparisons should be instituted, during the period of collegiate attendance, as to their relative value when he becomes a practitioner. On these topics, indeed, the student is but ill qualified to judge; and he is apt to receive partial opinions from older individuals, founded, too often, on particular biases, or on their greater or less acquaintance or familiarity with certain departments of the science, rather than with others. If practice were alone considered, the practical departments—medical, surgical, and obstetrical—ought to claim the precedence; but, to be well acquainted with these, absolutely requires an adequate knowledge of the others. To the young student, the department of *Anatomy* is decidedly the most attractive. It ministers most to his curiosity. It makes him informed respecting his own organisation. It demands, chiefly, the exercise of memory; requiring but little reflection; and the student, therefore, discovers, as in acquiring a new language, that he is daily adding to his stock of positive information. These remarks apply, however, to descriptive anatomy only. The other divisions of the subject—especially, general and transcendental anatomy—require mental qualifications and exertions, which many do not possess; and, therefore, they are considered dry and useless, and meet with but little favor, except from the advanced student. He is esteemed the best anatomist in the class, who is acquainted with the names and situations of the greatest number of organs and parts of organs. And how needlessly are the different parts of the organism divided and subdivided! and what a waste of time in directing the serious attention of the student to insignificant points, the recollection of which may



be a good exercise for the memory, but can be of little or no advantage in after life. The sphenoid bone, for example, seated at the base of the skull, has various projections from its circumference, to all of which names have been assigned; yet to the physician or surgeon, in the practice of his profession, the knowledge of most of these is wholly useless. No case can arise, in which this minute topographical division can assist him.

Anatomy is universally admitted to be the basis of medical education; but it is only the basis. Without a proper acquaintance with this department, it would be impossible for the student to comprehend the functions of the different organs of the body; their disordered actions, and the mode of treating such disorders with full advantage. To the surgeon it is indispensable, that he should be intimately acquainted with the absolute and relative situation of the various organs,—constituting what has been termed ‘Surgical, or Topographical Anatomy.’

Although a close connection exists between organisation and function,—the existence of the former being necessary to that of the latter,—the nicest attention to the anatomy of an organ will not teach the nature of the function, which it executes. We have an accurate knowledge of several parts of the human body, whose offices are wholly unknown. We know the eye anatomically, as perfectly perhaps as is practicable: the structure of the tongue is entirely familiar to us, yet the nicest dissection of these organs does not explain to us how the former is capable of conveying to us our visual ideas of external objects; or how the

latter can enable us to discriminate between the flavors of the various sapid bodies that are presented to it.

It has been already remarked, that if the time and opportunities of the student will permit, it would be well for him to follow one course of lectures on descriptive anatomy before he dissects; but, if unable to do this, his attention may be devoted to practical anatomy simultaneously with his attendance upon the lectures. One thing is clear, that no course—or number of courses—of lectures can make a man a practical anatomist. Nothing but the use of the knife, and the careful dissection of the different parts of the frame—in the first instance, under a competent instructor—can convey to him that information, which he ought to possess when sent abroad with a license to pursue his profession *practically* as a physician, and particularly as an operative surgeon. The authorities of some of the medical schools have therefore wisely required, that no young man shall present himself for graduation, who has not attended at least one course of anatomical dissections.

Not many years ago, the study of anatomy in the schools was restricted to a simple acquaintance with the different organs as exhibited on dissection, and if the student could point out the various prominences, and demarcations of the bones, muscles, &c. he was looked upon, even by the teacher, as an accomplished anatomist. The verbal memory was taxed to infinitude, whilst the higher powers of the intellect were suffered to lie dormant, and the beautiful, but mysterious, investigation of the intimate nature of the dif-

ferent tissues, and their mode of formation was totally disregarded. During the present century, however, more especially, the science of anatomy has been made to embrace new grounds. 'General Anatomy,' or 'Histology,' as it has been termed—for which we are principally indebted to the illustrious Bichat—includes these interesting topics of inquiry; and the anatomist now travels unhesitatingly into regions, half a century ago unknown to the scientific world. It is general anatomy, that teaches us the intimate texture and arrangement of the different organs, their correlations, the origin and formation of the human body, the character of its numerous constituents, and the changes, that supervene in the different stages of existence.

The same diseased action, affecting different tissues, may occasion symptoms of the most varied character. If the morbid condition of vessels, constituting inflammation, takes place in the cellular membrane, it gives rise to phlegmonous inflammation, of which the ordinary boil or abscess is an example. If it attacks the skin, the resulting inflammation is erysipelatous. How different, again, in its symptoms, progress, and termination, is the inflammation of the serous from that of the mucous membranes!

Without an attention to the evolution of organs, it would be impossible for the pathologist to comprehend the diseased conditions, that occur at different stages of existence. At particular ages, or in certain states of evolution and modification of structure, there is a tendency, in particular organs, rather than in others, to assume a morbid condition. This is strikingly exemplified in the supervention of hemorrhage at differ-

ent ages. Whilst hemorrhage from the nose is very common about the period of puberty; it is more apt to occur from the lungs, during the age of adolescence; and, after this period, the tendency is again to the head or to the abdomen.

A knowledge of the correlation of organs is all important to the pathologist. Hepatitis or inflammation of the liver,—enteritis or inflammation of the bowels, and gastritis or inflammation of the stomach, may all be varieties of inflammation of the peritoneum; yet how much the symptoms vary from those of peritonitis or of common inflammation of the peritoneum, owing to the functions of the parts, situated beneath the peritoneal covering of the liver, bowels, and stomach, being modified through this correlation! All these topics are elucidated by an attention to general anatomy.

Of late, attention has been directed to a mode of studying anatomy in relations of a deeply interesting character, which were at one time wholly overlooked. To this branch the name 'philosophical' or 'transcendental' has been applied. It embraces a knowledge of the relative importance of organs; their presence or absence in the animal series; the study, indeed, of living beings throughout the whole chain,

“ Each moss, each shell, each crawling insect;”

and from such study to deduce great general analogies, and fundamental laws, that may be applicable to all. For example, it is generally maintained, that the existence of a placenta and umbilical cord is indispensa-

ble to fœtal nutrition. As a general rule, these parts are present; and, in the opinion of most physiologists, no other function exists for them than that of being the receivers and conveyers of the blood of the mother to the child, and of returning that of the child to the mother, when it has administered to the nutrition of the former. Now, if the placenta and umbilical cord were always present, when a living child is born, and in every animal, the inference would be irrefragable, that such are their functions; but transcendental anatomy teaches us, that children have been carried to the full term in utero, and have been born alive, and in vigor, who had neither the appendages of placenta nor umbilical cord; and comparative anatomy further instructs us, that in the kangaroo, the opossum, the wombat, &c. they never exist. We, therefore, infer, that the placenta and umbilical cord are not indispensable to fœtal nutrition, and to this deduction we are led by inquiries appertaining to ‘transcendental anatomy.’

The labors of the French and Germans, more particularly, have been devoted to these ‘transcendental’ inquiries, and although we may be frequently disposed to smile—and with reason—at some of the generalisations suggested by transcendentalism, the ingenuity, displayed on many subjects, has furnished materials for reflection to the inquiring mind, and has suggested investigations, which might otherwise have wholly escaped attention.

They have led the reflecting anthropologist to a knowledge of the surprising uniformity that prevails in the organisation of animated nature,—the wonder-



ful, but all perfect simplicity, that characterises the works of the Almighty architect,—and, in many instances, to comprehend the existence of parts, which are apparently useless in a particular species or individual, but which are capable of being called into activity under favourable circumstances. In this way, the labors of the transcendental anatomists, of modern times, have tended to elucidate the complicated human organism,—that “mighty maze, but not without a plan.” Transcendentalism, in anatomy and physiology, is engaged in daily throwing more and more light on the inimitable *plan*; whilst the *maze* is gradually disappearing under the influence of careful observation, and philosophical induction; and, although we may occasionally meet with suggestions which may appear to be *philosophy in sport*, we have the advantage, frequently resulting from them, that in sober minds they become *science in earnest*.

The branch of anatomical science, to which the pathologist is most largely indebted, is that which has been termed ‘pathological’ or ‘morbid anatomy.’ Since the inspection of the dead has been permitted, and practised, to a greater extent, the discrimination of diseases has been rendered more easy, and the prognosis and treatment have become more satisfactory. Not many years ago, a hue and cry was raised against every one, who violated—as it was conceived—the sanctuary of death, and the anatomist was exposed to the most wanton insults and outrages. But the community have become more enlightened; and although, in some parts of the Union, legislative impediments may be thrown in the way of the anatomist, but few cases exist of a feeling so far behind the spirit of the age,

and still fewer in which the pathological inquirer, who may desire to investigate the morbid appearances in any unfortunate case that may have fallen under his management, is refused assent. Such objections, it need scarcely be said, ought never to exist. No professional man of character will request to examine a body, unless the object with him is one of importance, as regards the views he may have taken of the nature of the malady, or as an aid in the discrimination of similar morbid conditions. Philanthropy would suggest, that, in all such cases, the permission should be granted. By dissection, we are enabled to observe the morbid appearances in any fatal case, and to compare them with the symptoms, that were present during life; whence, by careful analogy, inferences may be deduced, which may enable us to detect similar diseases when they occur, and to treat them successfully. But, independently of these benefits, the mourning relative should bear in mind, that many diseases are of a family nature, and that, by careful inspection of one fatal case, the family physician may have his judgment so strengthened as to succeed in warding off a similar attack, should it threaten another of the family,—when, without the instruction afforded by his pathological investigations, he might have failed, and the life of a second member of the family might thus be sacrificed to the unfortunate—but amiable—prejudice.

Every where the difficulties thrown in the way of pathological anatomy are yielding. The press teems with the valuable contributions of the pathological anatomist; and some few philanthropists have gone so far—in their desire to remove the prepossessions of those, who are opposed to such investigations—as not

only to direct their bodies to be opened, but to be dissected in the public theatre, and demonstrated for the benefit of the student. Such was the testamentary request of the celebrated Bentham,—a request, which was faithfully executed by his friend Dr. Southwood Smith, of London, in the anatomical theatre of the school to which Dr. Smith is attached, and of which he is a valued ornament.

The student should omit no opportunity, that may offer—either before or after graduation—for *post mortem* examination; and, in every case in which he is permitted to carry it into effect, he will find, that he has made a satisfactory addition to his knowledge of the healthy and diseased conditions. Let him embrace every occasion for discriminating the appearances, which the parts present in health, from those which they assume under disease; and, in this way, he will be able to say what are healthy, what morbid, and what *cadaveric*,—that is, produced during, or after, dissolution; and lastly, let him be extremely cautious in referring the malady to the pathological lesion, which may be apparent on dissection. Often, he will be amply justified in so doing,—as where the symptoms have indicated inflammation of an organ, and evidences of such inflammation or its consequences appear on dissection,—but, in other cases, such an inference might be most unfounded; as where irregularity of the organic actions has persisted for days and weeks—in a case of remittent fever for example—and more or less inflammation is perceptible in the lining membrane of the intestines. Such inflammation ought often, perhaps, to be considered rather as a consequence of the exaltation and irregularity of the organic actions than as

their cause; and hence it is, that they are so common in those affections. Yet, if it should accord with the theory of any writer or teacher,—that inflammation in this or any other part of the economy is the essence of all fevers, and on dissection, evidences of such inflammation shall be apparent,—the student—whose mind has not been sufficiently trained by observation and reflection—is apt to give almost involuntary assent to the doctrine, and future observation is long in rectifying the error. The author is in the habit of examining the cavities of the abdomen and cranium in diseases, where mischief in the abdominal and cranial viscera has not been suspected; and he has rarely failed to observe appearances in the lining membrane of the alimentary canal, which a reckless or inveterate theorist might have invoked as ‘confirmation strong,’ did his views lead him to place the primary seat of disease in this portion of the economy.

On the importance of an acquaintance with *Physiology*,—or with the functions of the frame, as executed in health,—it is scarcely necessary to dwell. It is to existing observers, that this deeply interesting and valuable department of medical knowledge owes most of its improvements. Physiology may, indeed, be regarded as a new science, and as the source of numerous important improvements in the healing art, of recent introduction. It is to the want of a due knowledge of the healthy functions, that we must ascribe most of the errors, which have prevailed in therapeutics, and which still prevail in the practice of those, who adhere to old notions, or who have not taken the necessary steps for keeping pace with the rapidly ad-

vancing condition of medical science. Who, indeed, can honestly profess to know the signs, that indicate the diseased state of an organ, if he is utterly ignorant of the healthy manifestations? The science of physiology must, therefore, be an important object of study with every one desirous of distinguishing himself in his profession. A stimulus is now applied to the indolent physician, which did not formerly exist. The public are aware of the importance of attending to this "proper study of mankind;" the youths in some parts of the Union are required to study physiology in the ordinary schools, and the members of the bar, every where, find the utility of having paid some attention to it, in many of those intricate cases of forensic medicine, which so often agitate our halls of justice. This extension of the study of physiology cannot fail to exert a salutary excitation on those of our profession, who are disposed to be idle and listless; for what man of character could brook to be excelled, by the unprofessional, on topics, which so eminently belong to his course of study, and without which it is impossible for him to be a learned and truly useful physician!

It has been well remarked, by an intelligent writer\* on the best modes of improving the study of the several branches of medicine, that the crying defect of the British anatomical schools—and the remark is applicable elsewhere—is, that they teach anatomy as if a knowledge of the *dead* body were the sole foundation of medical study; whereas it is a knowledge of the

\* C. T. Haden, in the *Introductory Essay to the Transactions of the Associated Apothecaries and Surgeon Apothecaries of England and Wales*.



*living* body, which constitutes that foundation; and, therefore, it is not the parts of the body themselves, as they lie exanimate on the dissecting table, which are of importance, but the actions and functions of those parts, as they administer to the wants of the living man; and, hence, that physiology, or “living anatomy,”—*anatome animata*, as Haller appropriately termed it—is the real foundation of medical knowledge; and anatomy, in this view, is only requisite, inasmuch as, before the functions of a part can be comprehended, its structure must be examined and understood.

After all—as respects anatomy—the student’s main attention, during his collegiate course, will necessarily be devoted to the practical and topographical departments. He will have to make himself familiar with every essential anatomical constituent of the body, and will be especially careful in attaining an accurate knowledge of the relative situation of parts—to enable him to undertake the different surgical operations, which he may be called upon to perform at a moment’s notice. The valuable information, which may be conveyed by the lecturer on the other branches of anatomy, must be treasured up for subsequent reflection; and if the student employs his time to good purpose, he will daily find opportunity for pondering upon them, and impressing them on his memory. If the study of any of the ramifications of the subject be postponed, it had better be the last mentioned,—inasmuch as the purely practical departments can only be acquired where the requisite facilities exist.

The mode, in which the *Practice of Physic* is usually

taught, is replete with difficulties to the student. Instead of giving the symptoms that are pathognomonic or characteristic, the teacher generally goes over, under each disease, the symptoms that belong to the class. This is a fault, which likewise exists in the different treatises on the subject. Thus, under inflammation of an internal organ—say of the liver—we find all the symptoms, that are present in every form of inflammation, enumerated, along with those that belong to the particular affection; and this detail is repeated, under each variety of internal inflammation—a repetition, which occasions great confusion in the mind of the student, and induces him to consider, that the whole subject of semeiotics is an affair of mere memory; whilst, if his attention had been restricted to the physiology—sound and morbid—of the organ, the symptoms, common to the different cases, would generally suggest themselves on slight reflection.

In like manner, remedy after remedy is recommended without the rationale of their action being explained, or even hinted at. Hence it is, that a distinct department of *Therapeutics* is so essential in our schools;—a department, in other words, which treats of the great general principles involved in the *modus operandi* of remedial agents, and of their application to the diseased condition. This is commonly associated with *materia medica* or pharmacology, to which it is made subordinate. It is, however, of at least equal importance with the latter, and is easily separable from it. *Materia medica* teaches the properties of the tools or agents with which the physician has to fulfil his remedial indications, whilst *therapeutics* establishes those indications, and points out the mode, in which

such agents can be applied with the greatest advantage.

'*Preventive medicine*' or '*Hygiène*,' is a branch of therapeutics, to which too little attention has generally been paid. It includes the *materia alimentaria*, or the effect of different kinds of aliment as respects their nutrient and digestible properties, and their adaptation in sickness and in health, and canvasses every topic, that relates to the preservation of health.

It is in these departments, that we have to deplore the admixture of credulity, superstition, and faulty metaphysics, which so long disgraced the science of medicine. If we refer to the early history of our art, we are astonished to find the multitude of articles, that crowded the shop of the apothecary, were admitted into the catalogues of the *materia medica*, and, notwithstanding the testimonials in their favor, were—in a short space of time afterwards—discharged from them as injurious or inert.\* A better attention to the *series implexa causarum*, and to their relation with effects, has been yearly exhibiting the false reasoning, which occasioned the admission of many of those articles; and, accordingly, the number has been gradually diminishing. The tendency still is—and must be—to a farther diminution, and to get rid of those agents, that possess no advantages over others equally common, or of those whose properties are equivocal. The London Pharmacopœia contains about two hundred and thirty articles; the Pharmacopœia of the United States about two hundred and eighty; and the Parisian '*Codex*' upwards of 900! Yet there are few physicians, who

\* See the Author's '*General Therapeutics*,' p. 52.

employ a fifth part of those, that are comprised in the London Pharmacopœia, which is only one-fourth as copious as the French 'Codex.'

When we revert to the state of medical knowledge, not more than a hundred or a hundred and fifty years ago, and note the improvements, that have taken place in the interval in every branch of it, we cannot fail to be struck with the difference, and can readily account for the numerous disquisitions, that have appeared on the uncertainty of medicine, and for the ridicule, occasionally cast upon its professors by the various satirists. Medicine has always kept pace with the progress of the physical and moral sciences, and where these have been defective, or marked by folly and credulity, it has exhibited the same failings. Even so late as the time of Rousseau and D'Alembert, there was ample ground for the ridicule so frequently indulged by those, and other distinguished writers. "The following apologue," says D'Alembert, "made by a physician, a man of wit and philosophy, represents very well the state of that science. Nature is fighting with disease; a blind man, armed with a club,—that is the physician,—comes to settle the difference. He first tries to make peace; when he cannot accomplish this, he lifts his club, and strikes at random; if he strikes Nature, he kills Nature."

At that time, however, in the country in which D'Alembert wrote, the art of medicine—in the case of most of the fraternity—was enveloped in mystery and empiricism, and, too often, in fraud and imposture. Until a comparatively recent period, the doctrines and precepts of Hippocrates were reverentially followed; and the most degraded attention was paid to

authority and established routine. Molière has properly castigated this folly in his *L'Amour Médecin*, in the dialogue maintained between the physician Tomès and the maid Lisette.

“ *M. Tomès.* How is the coachman?

*Lisette.* Very well. He is dead.

*M. Tomès.* Dead?

*Lisette.* Yes.

*M. Tomès.* That is impossible.

*Lisette.* It may be impossible, but it is so.

*M. Tomès.* He cannot be dead, I say.

*Lisette.* I tell you he is dead and buried.

*M. Tomès.* You are mistaken.

*Lisette.* I saw it.

*M. Tomès.* It is impossible. Hippocrates says, that such diseases do not terminate till the fourteenth or twenty-first day, and it is only six days since he was taken sick.

*Lisette.* Hippocrates may say what he pleases, but the coachman is dead.\*”

Molière died about the commencement of the last century, and although his art had, doubtless, some effect in rectifying that, which should have yielded to sober reflection, his censures were well merited a century after they were written, and they are by no means devoid of application at the present time. It is but recently, that the minds of many were usurped by the notions of a celebrated systematist, whose dicta were—and still are by some—regarded as ca-

\* *L'Amour Médecin*, Acte ii. Scène 2.



nons; yet how few, at this day, pride themselves on an adherence to his views, and how small is now his influence, even in the very seat of his scientific exertions. Still, others have arisen, and are arising, to whom the same kind of homage, as masters, is paid; whose inculcations are received as indisputable authorities; and, mainly, because it is easier to embrace the views of a leader, and to find support under his responsibility, than it is to work out a path of our own.

Of late years, great advancement has taken place in the more purely practical parts of the profession. Instead of attending—as is too often the case with the mere routine practitioner—to the more prominent symptoms of disease, and attempting to remove them, the inquiries of the scientific physician are now directed to the pathological condition of the suffering organ; and on this all his rational indications of treatment repose.\*

Of the valuable auxiliaries in the discrimination of disease,—the gifts of modern times,—one of the most so is that of ‘Auscultation’ or listening—with or without the stethoscope—the invention of the late eminent French pathologist, and professor, Laennec. By this simple instrument, the physician is enabled to obtain audible evidences of the state of the lungs, and the heart, not to be acquired in any other manner. They, who have listened attentively and repeatedly, are alone able to appreciate the information it is capable of conveying, especially in that intractable malady—intractable in its advanced stages at least—

\* See the Author’s ‘General Therapeutics,’ p. 20.

pulmonary consumption. It is now well established, that if relief is to be experienced, in this dread disease, by any change of climate, the remedy must be had recourse to, before the malady has made such progress, that cavities have formed in the lungs, or before it has become—what has been called—‘confirmed.’ In detecting whether this unhappy advancement has taken place, auscultation is one of our chief guides; and if it should indicate the presence of abscesses or cavities in the lungs, the physician assumes a fearful responsibility, in advising a patient to incur all the evils of expatriation—the inconveniences dependent upon a removal from family and friends—under the delusive—the forlorn—hope, that a warmer or more equable climate may repair the mischief—alas! irremediable.\* How important, then, to be able to discriminate, whether the lungs are yet in a state to admit of well-founded expectations of benefit from change of climate; and how valuable the means of diagnosis or discrimination, which aids in substituting certainty, or a high degree of probability, for doubt, in cases where the steps of the sufferer, and of anxious relatives, are to be guided by the decision of the practitioner; and where such decision is to be attended, on the one hand, with prostration of their hopes; and, on the other, is to subject them to all the inconveniences of a distant, and often uncomfortable pilgrimage!

In respect to the best method of profiting by the *Clinical course*, a great deal will depend upon the method adopted by the professor,—as to the plan the stu-

\* See the Author’s ‘Elements of Hygiène,’ p. 195.

dent should pursue. Too often, perhaps, the clinical instructor selects the singular and the striking, rather than the common and more useful cases; and it has fallen to the lot of the author—as it must have done, more or less, to every one—to have had his attention directed chiefly to cases, during his period of hospital attendance, which he has rarely or never met with since. The object of the clinical professor should be to select mainly those cases, that must necessarily present themselves to all in their ordinary course of practice; to inquire aloud into the history of the case, and, at a fitting opportunity, to explain the etiology, semeiotics, diagnosis, prognosis and treatment adapted for the particular case, and for the class to which it belongs,—attracting the attention of the student to the more prominent points. With these views, acute cases should be first considered, as being most common and urgent; and, afterwards the more chronic. The young student is generally disposed to be over active in his treatment, and, if one remedy does not appear to be producing all the effect he anticipated, he is apt to fly at once to another; but if the professor be judicious, the student will soon learn that infinite mischief may be done in this manner, and that more reliance has to be placed upon the recuperative powers of the system, than he may have been disposed to imagine. It will be well for the clinical pupil to keep a journal of such cases as may merit the trouble; and never to permit an occasion to slip for verifying or disproving, by dissection, the views which he or his teacher may have been led to form of the precise nature of fatal maladies.

The remarks that have been made on *medical*,

apply equally to *surgical*, pathology. The operative department requires, however, a distinct consideration. In well devised lectures on operative surgery, all the operations are exhibited, and illustrated by a demonstration of the parts concerned. The diversified instruments and apparatuses of modern surgery are shown to the class, and their uses explained; yet the student should lose no opportunity for repeating the operations on the dead body, and, although this is by no means the same as operating on the living body, amidst the effusion of blood, and the sufferings of the patient, an intimate acquaintance with the relative situation of parts, derived from surgical dissection, places the operator comparatively at his ease, under the most trying circumstances. In some of our medical institutions, not only has the student the opportunity of attending the lectures of the professor of surgery; but it enters into the plan of instruction, to teach him the most improved methods of performing surgical operations, while he is engaged in prosecuting his dissections under the guidance of the demonstrator of anatomy,—an arrangement adopted for frequent illustration of those operative details, with which practice alone can make the student familiar.

In the present improved condition of *Surgery*, in all its branches, the philanthropist finds much to excite his warm admiration. The major operations have been simplified by the invention of appropriate instruments, and the bold daring of the modern surgeon has led him to perform operations, which were totally unknown, even in the middle of the last century;—for example, the ligature of the larger arteries, in cases



of aneurismal diseases, which, at one time, would have been permitted to run their course to a fatal termination without interference, but are now controlled by the discoveries of modern science. It is not only in the operative part, however, that the advancement of surgery is manifested. The skilful and benevolent surgeon has more gratification in saving a limb, which has been doomed to the knife, than in his most brilliant operations. There was a period, when every compound fracture was considered to require amputation; and this sentiment prevailed until within a comparatively recent period. At this time, the contrary doctrine is maintained, and no case is now subjected to amputation, unless supervening circumstances should render such a step imperiously necessary. To know, whether a severe and dangerous operation is demanded, is one of the most difficult parts of the surgeon's duty,—far more so than the operation when once determined upon. Yet, the public,—who are, in general, but imperfect judges of professional merit,—are infinitely more impressed with the success of an operation—which, perhaps, ought never to have been undertaken—than by the skilful and humane exertions of the surgeon to render such operation unnecessary. The author well recollects the *éclat* obtained by a surgeon, for performing the operation of the trephine, in a case of fracture of the skull, with slight depression, *unaccompanied with a single symptom of injury of the brain*; although, if fatal mischief had resulted from the operation, it might have been a question, whether the operator would not have been amenable, in a court of justice, for the injury he had inflicted;—as no principle is better established, than that the trephine should



never be employed except for the removal of existing bad symptoms, or of conditions, which must render the occurrence of such symptoms almost inevitable.

The community at large are fond of the exhibition of activity by the physician or surgeon, and this feeling has doubtless, at times, led a practitioner,—not possessed of extraordinary presence of mind or firmness of character,—to have recourse to measures of which his better judgment might not approve. Surgery is always a more popular branch with the student—and indeed with the *laity*—than medicine. Treating—as it does—the *morbi externi* or external diseases, it addresses itself more to the eye; its results are commonly palpable to the meanest capacity, and its agency is *heroic*, and commonly successful, if not in *curing*, at least in *removing* the mischief. Hence it has been termed and regarded ‘*medicina efficax*.’ “The adaptation of curative means requires more vigilance in medicine than in surgery. There is no end of the circumstances to be taken into consideration, day after day, in order to practise medicine with tolerable success. A man has an *external* inflammation: the surgeon sees it, and is at once sure of its existence; he prescribes for it, and sees its gradual decline as plainly as he first saw its rise and progress. A man has an *internal* inflammation; but the physician, not seeing it, is obliged to come to the knowledge of its existence by a great variety of considerations before he can know that it has begun to decline or has ceased. The uncertainty of physic I readily admit; but I do not admit the vulgar reproach which has followed from it. There is nothing absolutely sure but what rests on the basis of numbers, or falls within the sphere of the senses.

Where reasoning begins, there begins uncertainty; and on this account, the highest and the best things in the world are all uncertain, and so is our profession. But from this very uncertainty, those who practise it successfully claim their greatest honor; for where there is no possibility of error, no praise is due to the judgment of what is right.”\*

The department of *Obstetrics*—as generally taught in our schools—includes not only the practice of the art, but subjects that might be considered to appertain to other departments. It teaches, for example, the physiology of the pregnant and parturient states; embryology; as well as the different diseases to which the sex are subject; with the physiology and pathology of infancy, &c. &c.

The same method of studying these physiological and pathological topics, is demanded, as in the case of physiology and pathology in general. The practical part of obstetrics may be regarded as a branch of surgery,—the operations, at least, which are required, when the powers of the mother have to be aided, or when they are totally inoperative, from causes appertaining to mother or child.

There is but one mode, in which practical obstetrics can be perfectly taught; and that is by practice on the living female. Accordingly, wherever circumstances will admit, a lying-in hospital is attached to the medical school, at which opportunities are afforded for the student to officiate as accoucheur, under the guidance of an *expert*. In this country, this desirable appendage

\* Dr. Latham, *Op. citat.*, p. 51.

to the obstetrical chair does not always exist; but, in Europe, it is rare to find one unprovided. Generally, the students are divided into classes, which are summoned in turn; and, in France, towards the termination of labor, the clothes are thrown up, and as the woman is delivered on her back, and on an inclined plane, full opportunity is afforded for witnessing the mode in which the extrusion of the fœtus is accomplished.

Similar opportunities exist for 'touching' or exploring the condition of the uterus during the different stages of pregnancy, and thus for enabling the young physician to verify or disprove the existence of pregnancy in doubtful cases,—a topic, which,—since the introduction of the stethoscope more especially,—has been full of interest, in a practical point of view, to the obstetrician.

In schools, to which a lying-in establishment is not an adjunct, the student should embrace every opportunity for noting the different presentations on the 'mannekin;' and for rendering himself familiar with the various obstetrical instruments, and their application. The young practitioner is apt to become confused, if, in applying his forceps, the locking parts of the blades do not correspond. Familiarity with the instrument, which can be acquired by very slight attention, will prevent this; and if he practise frequently on the mannekin, he will not have much difficulty in the adaptation of his knowledge to the living female.

The department of medical science, to which the least importance is apt to be attached by the student, is *Chemistry*; and this accounts for the lamentable de-

ficiency in chemical attainments, observable amongst students and physicians in general. The notion ought to be discouraged, and it would be easily accomplished, were the authorities of the medical colleges to require an adequate acquaintance with the laws and facts of chemistry as essential to graduation. Many of the functions of the living body are carried on by chemical agency, and are incomprehensible without an acquaintance with that science. "Chemistry was once thought to be conversant only with the physiology of external nature; but every day is bringing us to look more and more to chemistry to explain the physiology of our own bodies. It cannot, therefore, be suffered to become a less prominent part of medical education than it is."\*

What student could understand the changes, produced in the air by respiration, unless he had some knowledge of chemistry; or how could he comprehend many of the other functions, that seem to be accomplished under chemico-vital influence? In like manner, the action of antilithics, antacids, and disinfectants; the knowledge of substances, that are compatible or incompatible in the same prescription; the action of antidotes, when poison has been taken,—indeed, the whole subject of toxicology, in order to be understood, requires an acquaintance with chemistry. The author well recollects a case of internal hemorrhage, treated by a practitioner by means altogether inert, in consequence of his ignorance on this point. He argued that sulphuric acid was a good astringent; that the acetate of lead possessed like virtues; and that if he

\* Latham, *Op. citat.*, p. 41.



added the two together, he would have a compound possessing the medical properties of both; whereas, a tyro in chemistry could have told him, that the resulting compound in no respect resembled its components. A sulphate of lead was necessarily formed, which is insoluble and inert; the only medicinal result of the decomposition being the acetic acid, which could exert little or no therapeutical agency.

Of late, great attention has been paid to the applications of chemistry to pathology, and especially to the pathological state of the blood and other fluids; and now, that the horror of the humoral pathology has abated, and, indeed, almost vanished, fresh investigations will be made into its varying character in disease, and into the best methods for restoring it to the healthy condition.

*Practical* chemists can be best made in the laboratory; but, owing to the number of students, who frequent the large medical schools, it is difficult to carry this course into effect. A very small apparatus is required for most of the experiments of a chemical and pharmaceutical character, so that they, who are desirous of being practically acquainted with the manipulations of the science may become so at a trifling expense.

The facts of chemical science are apt to flit from the mind, and require to be retained by repeated attention, especially as it is a department of science, which is rapidly progressive in its character, and which assumes fresh aspects in successive years, as it is enriched by new discoveries. Within the last twenty years, the *materia medica* has received some most valuable additions, from the labors of the French chemists and phar-



maciens more especially. The active principles of many energetic articles have been separated, so as to allow them to be exhibited, without the inconveniences, at times occasioned by the mixed matters with which they are associated in the vegetable. Hence, the quinine often takes the place of the bark; the morphine, of opium; the piperine, of the peppers; the salicine, of the willow bark, and the strychnine, of the nux vomica. The iodine, too, has, of late, assumed a rank amongst our useful therapeutical agents; and the deadly hydrocyanic acid has, under a wise form of administration, been adopted in medicine.

Under these various changes, how thunderstruck would one of the worthies, even of the last century—to whose opinions, perhaps, reverential deference was paid in his day—feel, if he were permitted to revisit this earth, and how inadequate would he be to resume his place in the profession, until he had undergone a previous education! A retrospective glance at the condition of medicine, in former periods, will exhibit to the student the unphilosophical ideas, that were generally entertained on many branches of medicine, in times not very remote, by the professional, and the unprofessional,—the learned as well as the ignorant; and if the inquirer compares them with the views at present indulged, he will discover, that the degrading superstitions, which at one time enthralled the mind, have been mainly abolished; that a better system of physics and of metaphysics has elucidated the laws, which connect effects with their causes;—that an improved acquaintance with anatomy—general, special, pathological and surgical—along with the interesting truths and speculations of physiology—sound and morbid—

have dispelled several of the illusions, "the children of an idle brain," which at one time weighed on the science; that mystery has been discarded; that arcana no longer exist; and that the darkness, and complicated dogmas of the schools have yielded to a better mode of reasoning and experiment, so that what was formerly taught, and implicitly credited, as a saying of the master, is now rejected, unless it comes home to the comprehension and conviction of the student. If we compare, indeed, the state of the profession now, with what it was one hundred—nay fifty—years ago, and then cast our regards towards the future, the prospect is most cheering. Yet we must not form too exaggerated an estimate of the powers of science from its present improved condition. When the gigantic mind of Newton had developed the 'new philosophy,' the most unbounded enthusiasm was experienced, and, it was presumed, that the world would be filled with wonders. "The glorious undertakers," says Glanvil—who was one of the earliest members and promoters of the Royal Society of London—"wherewith heaven hath blest our days, will leave the world better provided than they found it. And whereas in former times, such generous, free-spirited worthies were as the rare newly observed stars, a single one the wonder of an age, and this last century can glory in numerous constellations; I doubt not but that posterity will find many things that now are but rumors verified into practical realities. It may be, some ages hence, a voyage to the southern unknown tracts, yea, possibly, to the moon, will not be more strange than one to America. To those that come after us, it may be as ordinary to buy a pair of wings to fly into the remotest regions, as now a pair

of boots to ride a journey. And to confer, at the distance of the Indies, by sympathetic conveyances, may be as usual to future times as to us in a literary correspondence. The restoration of gray hairs to juvenility, and recalling the exhausted marrow, may, at length, be effected without a miracle. And the turning the now comparative desert world into a paradise, may not improbably be expected from late agriculture. Now those that judge by the narrowness of former principles and successes will smile at these paradoxical expectations. But questionless those first inventions, which have, in these latter ages, altered the face of all things, were as ridiculous to former times in their naked proposals, and mere suppositions. To have talked of a new earth to have been discovered, had been a romance to antiquity; and to sail without sight of stars or shores, by the guidance of a mineral, a story more absurd than the flight of Dædalus. That men should speak after their tongues were ashes, or communicate with each other in different hemispheres, before the invention of letters, could not but have been thought a fiction. Antiquity would not have believed the incredible force of our cannons, and would as coldly have entertained the wonders of the telescope. In these we all condemn antique incredulity. And it is likely posterity will have as much cause to pity ours. But yet, notwithstanding this straightness of shallow observers, there are a set of enlarged souls, that are more judiciously credulous. And those, who are acquainted with the diligent and ingenious endeavours of so many true philosophers, will despair of nothing."

Yet the new philosophy, valuable—invaluable—as it was, could not unfold all the wonders of the universe.

There were many subjects, such as the intimate nature of mind and of vitality, to the elucidation of which it was wholly inapplicable, or, if applicable, inadequate; and even with the light, which a century and a half of experiments and observations have shed upon us, there are numerous points in physics on which we remain in deep obscurity.

Condorcet—the strenuous advocate of the perfectibility of the human race—wildly supposed, that the time may arrive, when death will be the effect only of extraordinary accidents, or of the destruction—which will gradually become more and more tardy—of the vital forces; and that, in effect, the duration of the middle period between birth and this destruction has, in itself, no assignable term. Such a consummation is not to be expected, and indeed passeth all our understanding. Others have supposed, that rapid as the progress of science has been, and with every probability of its continuing to advance with accelerated speed, the universal law of compensation will continue to balance the improvement of the human understanding, by some equivalent failing. The subject is one of higher metaphysics. There are, doubtless, limits beyond which the powers of the human intellect cannot pass, but we are far from having attained those limits. Who, indeed, shall attempt to assign bounds to it? Instead of employing our time in such unprofitable discussions, it is better to turn assiduously to the discovery and investigation of truth, and whether our efforts be directed to *every* branch of the tree of knowledge, or to *one* only, science and humanity cannot fail to be enriched by precious fruit.

The study of the *History of Medicine* cannot fail to



impress the above truths on the mind of the student. He will see, that system after system has passed away, and that drug after drug has been brought forward, with virtues ascribed to it, which have been wholly imaginary; and that, after it has been used for a short period, it has sunk into oblivion; and he will be irresistibly led to the inference, that no theory or practice, which is not based on sound observation, and rigid induction, can long maintain its ground. It has been a common custom with teachers, to commence their lectures, on the different departments of medicine, with a history of the rise and progress of each department; but this is as objectionable a course, as to place a work on the history of medicine in the hands of a youth, who is just commencing the study. What value, for example, to the student, is the information that the lacteals were discovered by Aselli, or the lymphatics by Rudbeck, until he has learned the nature of these vessels? Or rather, how infinitely more easy is it for him to recollect the historical truth, after he has attained that necessary information. In accordance with those views, it is advisable, that the student should not peruse a work on the history of medicine, until he has attended one course of lectures on the different branches of medical science; after which,—that is, in the interval between his first and second courses of lectures,—and *a fortiori* after his collegiate attendance has terminated,—he can engage in the inquiry with full advantage.

The study of the history of physic has been designated by a distinguished lecturer “on the duties and qualifications of a physician,” as rather ornamental, than essentially useful. Yet his own remarks suffi-



ciently exhibit the weight, that ought to be attached to it.

“The history of medicine is not a subject of mere curiosity. To a physician, it is a useful and interesting inquiry. It is indeed an unpleasant task, and, at first view, seems an useless one, to inquire into the numerous theories, that have influenced the practice of physic in different ages. Of these, there has been a succession, which, in their turn, have been admired, and which have greatly influenced the practice of physic, and afterwards sunk into deserved oblivion. If their bad effects had ceased with the follies which gave them birth, it would have been unnecessary to revive their memory. But this has not been the case. A wrong practice, introduced in consequence of a prevailing theory, soon becomes diffused among people, who are no judges, whether the theory itself be well or ill founded. A physician of spirit and ingenuity, perhaps, rises up, and shows the absurdity of the theory; but it is not in his power to remove its pernicious consequences in practice. These were soon spread among a thousand ignorant people, who had adapted them to a theory of their own: for it must be observed, that the most illiterate pretenders to physic have their theories; and such pretenders, partly from ignorance, partly from pride, and partly from habit, are, of all others, the most obstinately attached to them.

“A thorough knowledge of the history of physic, by discovering the sources of the maxims and remedies adopted in practice, will naturally make a physician suspicious of those which were introduced by false reasoning or superstition. Yet it must be owned, that

some valuable remedies have sometimes been discovered in consequence of absurd theories. Another advantage, attending a knowledge of the history of physic, is its bringing us acquainted with some efficacious remedies, which time and other accidents had thrown into disuse.

“ The change of manners, and the variations of our speculative systems of physic, have, in some degree, contributed to the less general use of certain bold, but successful, remedies, employed by the ancients; as might be exemplified in the case of cauteries, the application of various exercises, of frictions, and of unctions, and in other instances. The history of medicine likewise shows us, how the revolutions of time bring back really the same fanciful hypotheses, which, only by a change of terms, have been repeatedly obtruded on the world.

“ Although the progress of medicine, since the age of Hippocrates, has indeed been slow, considering the number and abilities of its professors, yet it has made considerable advancement since that time. The history of physic shows how it has been gradually improved by accidental discoveries, by the rash attempts of empirics, by the accurate and faithful observations of sagacious physicians, and by the sober and diffident reasonings of men of true medical and philosophical genius. Nor should it be thought, that even the most fanciful hypotheses, that have prevailed in physic, have been entirely useless. The zeal of supporting a theory, however false, has given rise to some important experiments. Enthusiastic chemists, who boasted of a command over nature, and trusted to the efficacy of their own medicines, have sometimes performed sur-

passing cures, and by such remedies as no physician would have ventured on. On the other hand, Stahl and his followers, who trusted almost every thing to nature, have advanced the art by their diligent attention to the history of diseases, and to the operations of nature in performing the cure.”\*

## II

After two years of collegiate attendance, the student generally presents himself as a candidate for the *summi honores*; and if he has spent his time assiduously, in the manner advised, he will not, generally, have much difficulty in attaining his object. Unfortunately, owing to the number of medical schools in the country, this is more easy than it ought to be.

The medical faculty, charged with the examination of candidates, have a weighty responsibility attached to them, if they suffer an individual, who is incompetent to exercise the practical duties of his profession, to enter upon his perilous vocation under their sanction; and it has not unfrequently happened, that a graduate of a respectable school has been rejected, when he presented himself before the board of medical examiners of the army and navy, as a candidate for an assistant surgeon, in one of those branches of the service;—a heavy censure, too often, on the faculty, who passed him, and under the authority of whose diploma, he was emboldened to present himself before the examining board.

There is, perhaps, too much apprehension entertain-

\* ‘Lectures on the Duties and Qualifications of a Physician.’ By John Gregory, M. D., F. R. S., American Edition, Philadelphia, 1817; p. 91.

ed, that unusual strictness in the examinations for a degree may injure the school, where this prevails; and that, in the multiplicity of medical institutions, the students may resort to such as will pass them with facility; but this feeling of profit and loss should be banished from the minds of every officer of a liberal and enlightened institution; they should be guided by one impulse only—the determination to do their duty, without fear, or expectation of favor or reward; to uphold the dignity of their profession, and to protect the public against the misfortunes of unsophisticated or presumptuous ignorance. Such should be the sentiment of every one, who holds the responsible situation of a medical examiner; and the student ought to feel, that there is but little honor in a diploma, which is awarded on insufficient attainments.

It is too frequently the custom,—with the student, who is preparing for his final examination,—to follow the objectionable course—on which animadversions were made in an early part of this chapter—of endeavouring to devour every thing that has been written on the different departments of medicine; and, consequently, when the period of trial arrives, although he may be literally crammed with information, his mind is in the state of a well-stocked but miserably arranged warehouse, in which nothing is available at the time it is wanted. Far better than this is the custom of establishing what are termed, in the American colleges, ‘quizzing clubs,’ in which by mutual interrogation, the topics, that have been discussed by the different professors, are constantly revived, and re-impressed upon the minds of the members,—not, simply, a short time before the period for the examinations for a degree, but

throughout the whole of the session. If these examinations be regularly kept up, and the plan of study, which has been inculcated in these pages, be assiduously pursued, the candidate will always be ready, and far better adapted for the exercise of his profession, after graduation, than he, who, by incessant 'grinding' a short time before examination, has been 'made up' for the crisis, and whose knowledge evaporates with the excitement, that gave occasion to its acquisition.



## CHAPTER IV.

### MEDICAL EDUCATION, &c., AFTER GRADUATION.

WHEN the student has attained the *summi honores* of his profession, he ought not—it need hardly be said—to imagine, that he has arrived at proficiency,—that he has attained all knowledge respecting the intricate movements of the human economy, in health and in disease. The diploma, in reality, only shows to a discerning public, that the mind of the young practitioner has been imbued with the principles of medical science; and that he is prepared, at the outset, to profit by every opportunity for observation; to trace the nature of disease from indications that may be afforded him, and to apply his remedies to such disease, guided by all the lights, that illumine the profession in its present improved condition.

The graduate is now about to take his place in society, in the practice of a profession unusually arduous and responsible; requiring untiring zeal and industry,—the exercise, indeed, of every faculty that exalts the mind, and of every feeling, that adorns the heart;—a profession, to the members of which one of the greatest ornaments of the law—Sir William Blackstone—has assigned pre-eminence for “general and extensive knowledge,” and of whom the late learned philologist, Dr. Parr, remarked:—“While I allow, that

peculiar and important advantages arise from the appropriate studies of the three liberal professions, I must confess, that in erudition and science, and in habits of deep and comprehensive thinking, the pre-eminence, in some degree, must be assigned to physicians;”—a profession, the practice of which one of the first of the Romans conceived to elevate man nearer to the gods than any other avocation;\* and of which J. J. Rousseau said to Bernardin de Saint Pierre, in speaking of physicians;—“there is no condition, which requires more study than theirs; in every country, they are the most truly useful and learned of men.”

It is this honorable—this dignified calling—which the young physician is expected to support, not simply as a means of acquiring an honorable subsistence, but as a science connected with the best interests of humanity. In the exercise of this calling, he should proceed circumspectly, yet with zeal amounting to enthusiasm. Let him carefully avoid being wedded to any exclusive sect or system,—an attachment to which has strikingly retarded the progress of true science. Let him watch, with philosophy and diligence, the march of nature, discarding all blind empiricism; and, by this course, he will find, that each subsequent day will add to his stock of useful knowledge, and that many points, which seemed at first veiled in obscurity, will stand forth in bold relief; whilst, on others, he may continue to hesitate, owing to the very nature of the subject,—the intricate, the mysterious mechanism of life.

\* “Homines ad Deos nulla se proprius accedunt quam salutem hominibus dando.” CICERO.

A main object with every scientific practitioner should be the establishment of great general principles of pathology and therapeutics. The practice of medicine has been ruined by undue confidence being reposed in special remedial agents as adapted to special morbid conditions. A remedy may have been administered in a particular case of disease, and the disease may have terminated favorably; yet the result may have been, in nowise, referable to the ascribed cause. Hence, the value of that careful system of observation, which has been practically inculcated by observers,—of recent times, more especially.

In the common method of routine practice, the physician has but little time—if much engaged in the active exercise of his profession—to enter into a careful examination of every circumstance, that may have exerted an influence upon the condition of his patient: he prescribes for what appear to him the most prominent symptoms; has unbounded faith in the prescribed remedy; and if he should find the disordered action modified at his next visit, it is easier, and more gratifying, for him to believe, that the result has been produced by his agency, and through his prescription, than to inquire into the other modifying circumstances, that may have been present, and in operation. He is thus led, authorised—as he conceives—by experience, to register as a fact that which may be far otherwise; a sinister influence may thus be exerted on his future practice, by his being induced to place reliance on agents, which may be either inert, or incapable of fulfilling indications based upon rational general principles. The tendency of the popular—and, indeed, of the professional—mind is to search after ‘facts,’—too

often perhaps to the exclusion of principles, on which, after all, the improvement of medicine has to repose. Facts must furnish the pabulum for such principles, but these alleged facts must be carefully sifted, must be over and over again proved; and, if this course be pursued, the large mass will be found to belong to what have not inappropriately received the epithet 'false.'

A recent writer of eminence has gone so far as to assert, that we are seldom justified in ascribing effects to our remedial agencies, employed in any disease, until we have satisfied ourselves, that cases, exactly similar in time, place, and circumstances, have failed to do equally well under the omission of those remedies.\* This is a kind of knowledge, that can only be derived from experience; but it is so repugnant to the feelings of mankind,—who like to see activity on the part of the practitioner,—as well as to the mode in which practitioners are usually educated, that the materials for a just comparison are not readily attainable; nor, perhaps,—unless we consider, that the comparison has not been previously and fairly made,—ought they to be so, inasmuch as the doctrines, admitted by the profession, and inculcated in the schools, are presumed,—and in general correctly,—to be based upon observation; although, in many cases, that observation has, doubtless, been inadequate. "The benefit," says an intellectual writer, "which a physician derives from his own opportunities of observation, in common language called his experience, is not in proportion to

\* Professor Bigelow, in 'A Discourse on Self-limited Diseases,' p. 30. Boston. 1835.



the period of time over which it has been extended, or the number of facts which have passed under his view. It must depend on the attention, with which he has observed these facts and traced their relations to each other; on the anxiety with which he has separated incidental relations from those which are uniform, and the caution with which he has ventured in assuming the relation of cause and effect, or has advanced to general principles. It must depend, further, on the jealousy and suspicion with which he has received even his own conclusions, and the care with which he has corrected them from time to time by further observations. Finally, it must depend on the judgment with which he applies the knowledge thus acquired to the investigation and treatment of new cases; by tracing promptly the points of affinity between the case under his view, and those cases on which his knowledge was founded; by discovering real points of resemblance where there is an apparent difference, and real points of difference where there is an apparent resemblance. The farther a physician advances in this course of rigid inquiry, he becomes more sensible of the difficulties with which his science is encumbered, more suspicious of all general conclusions, and more anxious to bring them to the test of minute and extensive observation: in particular, he learns to exercise more and more caution in considering any one event in medicine as the cause of another. In real acquisition, consequently, his progress is slow; for much of his improvement consists in detecting the fallacy of systems, which he once considered as established, and the instability of principles, in which he once confided as infallible. But these discoveries pre-



pare the way for his actual progress, and the conclusions at which he does arrive then fall upon his mind with all the authority of truth.”\*

In aiding the young practitioner to attain this necessary and correct experience, it is very desirable—where it can be effected—that he should reside for a time in some hospital, infirmary or almshouse. To the large mass of students, this course will be impracticable, inasmuch as but a limited number can be admitted; whilst the circumstances of many would preclude them, were they ever so desirous. To such as can effect the object, nothing but benefit can accrue,—especially if the attending physician and surgeon be well acquainted with their profession; be faithful observers, good therapists, and able and willing to communicate to the student all that they themselves know, the grounds for their judgment, and the mode in which they propose to carry into effect the suggestions of such judgment. In an institution thus conducted, the student becomes conversant not only with the great points of practice, but with the minor operations of bleeding, bandaging, &c.; with the art of compounding prescriptions, if previously unacquainted with these important duties,—and is enabled to enter upon independent practice, with all that confidence in his resources, which familiarity in their adaptation can alone communicate.

When Dr. Samuel Johnson somewhat splenetically defined the profession of physic as “a melancholy

\* ‘Inquiries concerning the Intellectual Powers and the Investigation of Truth.’ By John Abercrombie, M. D., F. R. S., &c. &c. Amer. edit. p. 352.

attendance on misery; a mean submission to peevishness, and a continual interruption of pleasure," he was constrained to admit his belief, that "every man has found in physicians great liberality and dignity of sentiment; very prompt effusion of beneficence, and willingness to exert a lucrative art, where there was no hope of lucre." It was of such beneficent practitioners, that Voltaire,—almost in the language of Cicero, already cited,—remarked: "The man who is occupied in restoring health to his fellows, from pure benevolence, is far above all the grandees of the earth: he belongs to the divinity."

Gratifying, indeed, must it be to the medical philanthropist to know, that he has relieved the sick from pain,—snatched him, perhaps, from the jaws of death,—and doubly gratifying, if he can feel the conviction, that the result has been brought about by the sedulous study of his profession; and by the care and attention he has bestowed in watching the rise of every symptom; meeting it at its onset, and arresting its development, before it had laid fatal hold of the sufferer. Independently of all hope of pecuniary remuneration, the pleasing result of his well directed, and skilful efforts is of itself ample recompense to the compassionate.

An excellent and eloquent writer, to whom allusion has already been made in these pages, and whose work ought to be perused, and re-perused, by every practitioner of medicine, regards humanity as the chief of the moral qualities, peculiarly required in the character of the physician. "Sympathy," he observes, "produces an anxious attention to a thousand little circumstances, that may tend to relieve the patient; an attention, which money can never purchase;—hence

the inexpressible comfort of having a friend for a physician. Sympathy naturally engages the affection and confidence of a patient, which, in many cases, is of the utmost consequence to recovery. If the physician possesses gentleness of manners, and a compassionate heart, and what Shakspeare so emphatically called "the milk of human kindness," the patient feels his approach like that of a guardian angel ministering to his relief; while every visit of a physician, who is unfeeling and rough in his manners, makes his heart sink within him, as at the presence of one who comes to pronounce his doom. Men of the most compassionate tempers, by being daily conversant with scenes of distress, acquire in process of time that composure and firmness of mind so necessary in the practice of physic. They can feel whatever is amiable in pity, without suffering it to enervate or unman them. Such physicians as are callous to sentiments of humanity treat this sympathy with ridicule, and represent it either as hypocrisy or as the indication of a feeble mind. That sympathy is often affected, I am afraid is true. But this affectation may be easily seen through. Real sympathy is never ostentatious: on the contrary, it rather strives to conceal itself. But, what most effectually detects this hypocrisy, is a physician's different manner of behaving to people in high and people in low life; to those who reward him handsomely, and those who have not the means to do it. A generous and elevated mind is even more shy in expressing sympathy with those of high rank than with those of humbler life; being jealous of the unworthy construction so usually annexed to it. The insinuation, that a compassionate and feeling heart is commonly accompanied with a weak understanding and feeble mind, is malig-

nant and false. Experience demonstrates, that a gentle and humane temper, far from being inconsistent with vigor of mind, is its usual attendant; and that rough and blustering manners generally accompany a weak understanding and a mean soul, and are indeed frequently affected by men void of magnanimity and personal courage, in order to conceal their natural defects.”\*

Sympathy for suffering, and that benevolence to the distressed, which droppeth

“As the gentle rain from heaven  
Upon the place beneath,”

have, indeed, ever been the proud attributes of the medical profession.

It is scarcely necessary to dwell on the importance, to the young physician, of attending to his address; of adopting a kind and soothing manner; and of impressing his patient with a conviction, that he is feelingly alive to his welfare; or to urge the advantage of his possessing gentleness and flexibility, to bear patiently—and with apparent cheerfulness—the contradictions and disappointments to which the best are occasionally exposed; and of gratifying the whims and caprices of his patients, so far as he can do so with propriety; but he must be careful not to have it supposed, that he has not firmness to resist a proposition, which is, in his opinion, contrary to their interests, however grateful it may be to their inclinations. When once the authority of the physician over his patient is

\* Gregory, *Op. cit.*, p. 24.



lost, indifference is apt to be engendered; confidence is gone, and contempt and estrangement follow.

Nor is it requisite, that the advantages of temperance and sobriety should be inculcated,—virtues, which—although expected and demanded of all—are peculiarly required of the medical practitioner. It is not the author's province, to point out here, the numerous—the awful—evils, temporal and eternal, that follow in the train of intemperance; nor need he dwell on

—————“All the kinds  
Of maladies, that lead to death's grim cave  
Wrought by intemperance.”

The physician must recollect, that he is often the arbiter of life or death; that the hopes of an afflicted family are reposed on his exertions; that a heavier weight of responsibility is cast upon him, before God, than could perhaps exist in any other situation; and let him reflect for a moment, how utterly unfit—“with memory confused and interrupted thought”—he would become to exercise a profession, which requires, above all others, an unmixed exertion of judgment, clearness of thought, and absence from all perplexity and unsteadiness,—which demands, in short, the lively and vigorous employment of every intellectual and moral faculty.

Neither is it necessary to expatiate on the importance of the young practitioner's possessing presence of mind to adapt him for every sudden and trying emergency, of which he must be destined to meet with many, in his surgical career more especially; nor on his obligations to secrecy, discretion, and honor. It is



sufficient to name these qualifications, in order that their value shall be seen. So long ago as the first promulgation of the oath, ascribed to the father of physic, but which does not appear to date farther back than the School of Alexandria, these requisites were urged upon the graduate; and an oath, binding him to the discharge of these and other points of professional duty, was always administered, when he was declared worthy of being admitted to the practice of his profession. The oath, even now required in the University of Edinburgh, calls upon the graduate “to practice physic *circumspectly, correctly, and honorably* (cautè, castè, probèque;) and faithfully to have recourse to every thing conducive to the health of the bodies of the sick: and, lastly, never—without great cause—to divulge any thing that ought to be concealed, which may be heard or seen during his professional attendance. To this oath,” the instrument adds, “let the Deity be witness.”

It too often happens, that the young practitioner,—flushed with his own estimate of his talents and attainments, and despising, what he conceives to be derogatory, the employment of any arts to succeed in his profession,—is too little attentive to some of those collateral circumstances that have been enumerated. A neglect of them is, however, injustice to himself, inasmuch as mankind are long in discovering virtues, until they are presented to them with some adventitious aid. Hence it is, that tact is generally so much more successful than talent, and that many practitioners succeed, by the possession of those collateral advantages, to a greater degree than ability alone would ever have justified. Some few, it is true, have risen

to unusual eminence in their profession solely by their distinguished talents, and, occasionally, when their manners have been rough and presumptuous; but the cases are extremely rare. Eccentricity—as these moral aberrations have been sometimes mildly designated—may succeed for a time, where the intellectual qualifications are lofty; but, it may be safely said, never to the extent, that these qualifications would have carried the possessor, in the absence of such defects; and, frequently, the effect of elevated talents and acquirements is completely counteracted by some deficiencies in the moral qualities.

The public are singularly ill-informed regarding the qualifications of the medical practitioner, and hence the success, that every where attends quackery and imposture. His art is supposed to be enveloped in mystery, which no effort of theirs can penetrate; and his skill in his profession is commonly estimated by a fancied success, or want of success, in practice,—one of the most uncertain criteria, that can well be conceived. Were each of two physicians to have a patient under *precisely* analogous circumstances, the degree of success, obtained by one or the other, might be a sufficient measure of skill. But it is impossible for us to say, in all cases, even by previous accurate examination, that there may not be modifying circumstances in the one case, that do not exist in the other, and that might account for one being brought to a satisfactory termination, and the other not. If ten individuals be exposed to precisely the same morbid agency,—say to cold and moisture applied to the feet,—all may not have the same effect induced. One may be attacked with inflammatory sore-throat, an-

other with catarrh, a third with diarrhœa, whilst others may remain in health; yet all these different results have succeeded to the application of the same cause; and disease has attacked one individual and texture rather than another, according to the greater predisposition of such individual and texture, at the time, to assume diseased action.

Now, that which happens to *morbific*, happens also to *remedial* agencies, and it presents one of the greatest difficulties in therapeutics. Hence, the impracticability of deducing any correct inferences, regarding the comparative skill of different practitioners, from the results of practice alone.

It is in consequence of the public being such imperfect judges of professional merit, that more practitioners succeed by their personal—than by their professional—qualifications. A professional friend of the author—**himself** distinguished as a man of science, and successful in his avocation—has expressed the opinion,\* that if we analyse, as it were, the different practitioners, who present themselves to our notice, we may always discover the causes of their success, or want of success, in life. It may be seen, that in one man, an excellent address, a soothing manner, a real or assumed interest in the welfare of his patients, and, above all, a scrupulous and unwearied attention in gratifying patients and their friends, by falling in with their views, have been sufficient to lead even a superficial practitioner to the summit of his profession; whilst, in another person, marked defects of manner and appearance,

\* The late C. T. Haden, Esq., in the introduction to the work previously cited.

provided good conduct be present, may not have prevented him from equally rising to professional eminence, if his acquirements authorise such an elevation.

At the same time, it must be admitted, that good fortune has much to do with this. A man of genuine merit, and well adapted, in every respect, for the practical exercise of his profession, may linger in comparative obscurity, unless some fortunate circumstance should bring him prominently before the public; whilst we have too many instances to show, that the ignorant and the presuming occasionally push themselves into notice, and succeed to a degree, which is denied their more deserving—but less arrogant—brethren. The success of quackery—and that even of the most barefaced kind—sufficiently exhibits how easy it is to rise on the credulities and weaknesses of mankind.

In conclusion:—although the present work is not intended to comprise the subject of professional ethics; it may be well to remind the young physician, that independently of his duty to those who may be placed under his healing care, there is one, which he owes to his professional brethren, as well as to his fellow-men in general. This duty is the foundation of all medical etiquette; and, although the anxious relatives of the sick are often incapable of appreciating the object of such etiquette, it reposes simply on the heaven-descended injunction—the great basis of all ethics;—“Whatsoever ye would, that men should do unto you, do ye even so to them.”

This clear and comprehensive principle of human action commands us to exercise justice and benevo-



lence towards our fellow men,—a principle, which, if observed by all, could not fail to add largely to the amount of human happiness and prosperity. Yet—strange to say—a violation of this great rule of conduct is so common amongst the members of a profession, which is, in its essence, most dignified, most exalted, most liberal, and, as a recent writer has expressed it, “the most noble and disinterested of human avocations,”\* that the disagreement of physicians has become proverbial; the profession has been discredited, and ridicule and contempt have been cast upon it, owing to the delinquency of those, who, from defective manners, feelings, or education, ought never to have been admitted within its pales. Too often, also, this ungenerous conduct is suggested by base ambition, or by the love of lucre, in minds devoid of the kindlier sympathies, and careless of the honor and advancement of the science.

It is unhappily too easy for an ungenerous individual, if possessed of tact, to create an unfavorable impression in the minds of a distressed family, against his more distinguished brother. The public cannot well discriminate between the man of science and philanthropy, and the unprincipled pretender. Pretension is, accordingly, too often received as evidence of capacity; and this facility of belief is the cause, as before remarked, why empiricism—in and out of the profession—meets with so much success.

Yet the unprofessional empiric is a character far more exalted than the physician, who, from malevo-

\* Ryan's ‘Medical Jurisprudence.’ Amer. Edit. p. 57.



lence, or envy, or any sordid motive, openly, or by insinuation, undermines a reputation,—

“ Whose cordial drops once spilt by some rash hand,  
Not all the owner's care, nor the repenting toil  
Of the rude spiller ever can collect,  
To its first purity and native sweetness;”

and who attempts to elevate his dishonest self on the ruins of his fellow man—his professional brother. He may flourish for a time. He may vegetate in fungous luxuriance; but his feeble vitality will not withstand the chilling blasts of scorn; the leaf, whilst yet green, will be seared, and he will sooner or later sink into that insignificance from which he ought never to have emerged.

The young physician should determine to follow the dignified calling he has chosen ‘circumspectly, correctly, and honorably.’ He should be impressed with the responsible character with which he is invested. He should feel, that the true dignity of medicine is to be maintained by the superior learning and abilities of those who profess it. His manners and address should be liberal, and polished; compassionate and gentle. He should be open and candid,—disdaining all artifice. Then may he set at naught the ridicule and abuse, to which the science has been exposed, from those who are unacquainted with its character and resources. Prosperity and happiness will attend him. The infant, on the maternal lap, will be taught to lisp his name with gratitude. The widow and the fatherless—even in their bereavement—will bless his skilful and

benevolent exertions, though unsuccessful. The affectionate parents, who have watched over his youth, and witnessed, with solicitude, his ripening manhood, will glory in him. His Alma Mater, which shed upon him her highest honors, will cherish him, as the fond mother cherishes her offspring; and his country will be proud to rank him amongst the most useful and the most meritorious of her citizens.



# A P P E N D I X .

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## BIBLIOGRAPHY.

### I. ANATOMY.

#### a. COMPARATIVE ANATOMY.

*Works not reprinted in this Country.*

1. BLUMENBACH, J. F.—*A Manual of Comparative Anatomy*, Translated from the German of J. F. BLUMENBACH; with additional Notes, by WILLIAM LAWRENCE, Esq., F. R. S., surgeon to St. Bartholomew's hospital, to Bridewell, and Bethlem hospitals, &c. &c. Second edition, revised and augmented, by WILLIAM COULSON, Demonstrator of Anatomy at the medical school, Aldersgate street, and member of the Zoological Society. 8vo. pp. 379. London, 1827.

A valuable work, much enriched by the labors of the English editors.

2. CARUS, C. G.—*An Introduction to the Comparative Anatomy of Animals; compiled with constant reference to Physiology, and elucidated by twenty Copperplates.* By C. G. CARUS, *Med. et Phil. Doct.*, Professor of Midwifery to the Medico-Chirurgical Academy at Dresden, Director of the Royal Saxon Obstetrical Institution at the same place, and Associate of various learned Societies. Translated from the German, by R. T. GORE, Member of the Royal

College of Surgeons in London. In two volumes, 8vo. pp. 371, 400. London, 1827. With an Atlas of 20 plates.

An interesting work. It is divided into two parts—*part first* comprising the “History of the organs belonging to the sphere of animal life;” and *part second*, the “History of organs belonging to the vegetative sphere.” The appendix contains a few observations on the dissection and preparation of the bodies of animals; and on the discovery of a circulation in insects.

The plates are illustrative of the subject.

3. GRANT, ROBERT E.—*Outlines of Comparative Anatomy*. By ROBERT E. GRANT, M. D., F. R. S., Ed., F. L. S., G. S., Z. S., W. S. &c. Professor of Comparative Anatomy and Zoology, in the University of London, and Lecturer on Human Physiology. Parts 1, 2 and 3. 8vo. pp. 352. London, 1835-6.

An admirable work, by a first rate comparative anatomist and physiologist. The parts already published comprise; 1, Osteology, ligaments and muscles, illustrated with 65 wood-cuts; 2, The Muscular and Nervous Systems, illustrated with 32 wood-cuts; and 3, The Nervous System, organs of the senses, and digestive organs, with 23 wood-cuts.

#### b. DESCRIPTIVE ANATOMY.

##### 1. American.

4. HORNER, W. E.—*A Treatise on Special and General Anatomy*. By WILLIAM E. HORNER, M. D., Professor of Anatomy in the University of Pennsylvania—Member of the Imperial Medico-Chirurgical Academy of St. Petersburg—of the American Philosophical Society, &c.—“Multum adhuc restat operis, multumque restabit, nec ulli nato post mille sæcula præeludetur occasio aliquid adjiciendi.” SENEC. EPIST. In two volumes. Fourth edition, revised and improved. 8vo. pp. 519, 524. Philadelphia, 1836.

A good treatise on the subject. The number of editions, through which it has passed, show, that it is extensively used. It is, of course, the text book of the Professor in his lectures.

5. HORNER, W. E.—*Lessons on Practical Anatomy for the Use*



of *Dissectors*. By W. E. HORNER, M. D., Professor of Anatomy in the University of Pennsylvania; Surgeon at the Philadelphia hospital, *Blockley*, &c. 3d and improved edition. 8vo. pp. 503. Philadelphia, 1836.

A companion to the dissecting room, well calculated for the objects contemplated by the author. It contains an introduction "on dissecting, and on the method of making anatomical preparations;" and is divided into 5 parts. Part 1, giving the practical anatomy of the head and neck; 2, of the trunk; 3, of the extremities; 4, of the ligaments; and 5, of the integuments.

6. WISTAR, C.—*A System of Anatomy for the Use of Students of Medicine*. By CASPAR WISTAR, M. D., late Professor of Anatomy in the University of Pennsylvania. Fifth edition; with notes and additions, by WILLIAM EDMONDS HORNER, M. D., Adjunct Professor of Anatomy in the University of Pennsylvania, Member of the American Philosophical Society, &c. In two volumes, 8vo. Philadelphia, 1830.

This work has been almost superseded by Dr. HORNER's own work, as well as by the other treatises on anatomy, which have appeared since it was first published.

It is illustrated by several copperplate engravings—of the skeleton and its different parts, the muscles, viscera, lymphatics, urinary and genital organs, blood-vessels, and nervous system.

## 2. Reprints of Foreign Works.

7. BAYLE, A. L. J.—*An Elementary Treatise on Anatomy*. By A. L. J. BAYLE, M. D., Adjunct Professor of the Faculty of Medicine at Paris, &c. &c. &c. Translated from the 4th edition of the French, by A. SIDNEY DOANE, A. M., M. D., 12mo. pp. 470. New York, 1837.

An extremely useful 'Manual'—as Bayle himself termed it; the French edition of which we have had since its first appearance. Its merits, as Dr. Doane properly observes, are accuracy and conciseness of description, combined with a happy arrangement of the subject.

8. BELL, JOHN and CHARLES.—*The Anatomy and Physiology of the Human Body*. By JOHN and CHARLES BELL. The whole more perfectly systematised and corrected, by CHARLES BELL, Professor of Anatomy and Surgery

to the Royal College of Surgeons of London, &c. &c. In two volumes. The fifth American edition, (reprinted from the sixth London edition of 1826.) The text revised, with various important additions, from the writings of Soemmering, Bichat, Béclard, Meckel, Spurzheim, Wistar, &c. By JOHN D. GODMAN, M. D., Professor of Anatomy and Physiology in Rutgers' Medical College. New York, 8vo. pp. 583, 475.

This has always been a popular work in the schools, embracing—as it does—both descriptive anatomy and physiology, conveyed in an agreeable style, and illustrated by numerous plates and marginal wood-cuts. Numerous notes have been added by the lamented American editor, and an appendix, containing the anatomy of the fœtal brain, from TIEDEMANN; absorption from the digestive canal, from COPLAND's edition of Richerand's 'Physiology;' and the chemical constitution of the solids and fluids of the human body from the same.

9. BELL, SIR CHARLES.—*A System of Dissections, explaining the Anatomy of the Human Body, with the manner of Displaying the Parts, the Distinguishing the Natural from the Diseased appearances, and pointing out to the Student the Objects most worthy of attention, during a course of Dissections.* By CHARLES BELL, &c. &c. In two volumes, 18mo. pp. 265 and 264. First American from the third London edition. Baltimore, 1814.

Superseded by more recent and more valuable works on practical anatomy.

10. CLOQUET, H.—*A System of Human Anatomy*, Translated from the French of H. CLOQUET, M. D., Professor of Physiology, and Member of the Philomathie Society of Paris. With notes and a corrected nomenclature. By ROBERT KNOX, M. D., F. R. S., E., Lecturer on Anatomy, Fellow of the Royal College of Surgeons in Edinburgh, and Conservator of its museum. Large 8vo. pp. 836. Boston, 1830.

A good work on descriptive anatomy. The order, in which the parts are considered, is, 1. Organs of locomotion. 2. Organs of the voice. 3. Organs of sensation. 4. Organs of digestion. 5. Organs of respiration. 6. Organs of circulation. 7. Organs of absorption. 8. Organs of the secretions. 9. Organs of generation.

It has no plates.

11. DUBLIN DISSECTOR.—*The Dublin Dissector, or Manual of Anatomy; comprising a Concise Description of the Bones, Muscles, Vessels, Nerves and Viscera; also the relative Anatomy of the Different Regions of the Human Body; for the Use of Students in the Dissecting Room.* By a member of the Royal College of Surgeons in Ireland. First American from the second Dublin edition. 8vo. pp. 314. Washington, 1835.

This is one of the reprints in the '*Register and Library of Medical Science.*' It is a useful companion to the dissector.

12. MAYGRIER, J. P.—*The Anatomist's Manual; or a Treatise on the Manner of Preparing all the parts of Anatomy, followed by a Complete Description of these Parts.* In two volumes. By J. P. MAYGRIER, M. D. P., Professor of Anatomy and Physiology; of Midwifery, and the diseases of Women and Children; Physician to the Bureau de Charité of the 10th Arrondissement; Member of the Medical Society of Emulation of Paris, of that of Practical Medicine in the same city; of the Medical Societies of Liège and Toulouse; of those of *the Sciences* in Maçon, Marseilles, &c. Translated from the fourth French edition, by GUNNING S. BEDFORD, M. D., Lecturer on Obstetrics, &c. in the New York School of Medicine; Member of the Medical Society of the City and County of New York; of the New York Literary and Philosophical Society; of the Historical Society, &c. Small 8vo. pp. 378, 305. New York, 1832.

A good manual of descriptive anatomy; not, however, much used in our schools.

13. MECKEL, J. F.—*Manual of General, Descriptive and Pathological Anatomy.* By J. F. MECKEL, Professor of Anatomy at Halle, &c. &c. &c. Translated from the German into French, with Additions and Notes. By A. J. L. JOURDAN, Member of the Royal Academy of Medicine at Paris, &c. &c. &c. and G. BRESCHET, Adjunct Professor of Anatomy at the School of Medicine, &c. &c. &c. Translated from the French with Notes, by A. SIDNEY DOANE, A. M., M. D. In three volumes, 8vo. pp. 522, 525, and 548.

A work full of useful and varied information; too transcendental,

perhaps, for the tyro; but furnishing important hints to the more advanced student. It has been adopted as a text book by some of our most enlightened anatomical teachers.

14. PAXTON, JAMES.—*An Introduction to the Study of Human Anatomy*. By JAMES PAXTON, Member of the Royal College of Surgeons, Honorary Member of the Ashmolean Society, and Author of the Notes and Illustrations of Paley's Natural Theology. With Illustrations. In two volumes, 8vo. pp. 421 and 336. First American edition, with additions, by WINSLOW LEWIS, Jr., M. D., Demonstrator of Anatomy to the Medical Department of Harvard University. Boston, 1832, 1834.

The value of this work is in its marginal illustrations, which are very numerous. The *first* volume comprises the anatomy of the bones, cartilages, fibres, museular and vascular systems;—the *second*, a continuation of the anatomy of the vascular system; the absorbent and nervous system of the particular organs of sensation; of the organs of digestion, respiration, secretion, and generation, of the fœtus and of the serous and cellular tissue.

The descriptions are not remarkable. A glossary is added to the second volume, which is extremely meagre and unsatisfactory; occasionally, indeed, inaccurate. For example;—"ACINI (*acinus*, 'a grape seed') the internal structure of several glands." "CLITORIS (*κλειω*, 'to conceal') a part of the female pudendum concealed by the labia majora." "RENES, the kidneys through which the urine flows," &c. &c.

15. SARLANDIERE, CHEV. J.—*Systematised Anatomy or Human Organography, in synoptical tables, with numerous plates. For the use of Universities, Faculties, and Schools of Medicine and Surgery, Academies of Painting, Sculpture, and the Royal Colleges*. By the CHEV. J. SARLANDIERE, D. M., Member of the Royal Academy of Madrid, and of the Medical Society of Emulation at Paris; Correspondent of the Medical Society of Louvain, Breslaw, &c.; Ex-Surgeon of the French Army and of the Military Hospital at Paris. Translated from the French, by W. C. ROBERTS, M. D., Member of the Medical Society of the City and County of New York. Large folio. New York, 1835.

A useful accompaniment to anatomical studies. The plates are

lithographic and well executed; each plate containing numerous figures.

3. *Not reprinted.*

16. BOURGERY, J. M.—*The whole Anatomy of the Human Body, with its various practical applications; including a system of Operative Surgery.* By J. M. BOURGERY, M. D. Illustrated by lithographic plates, drawn from nature, by N. H. JACOB. Divided into four parts: Descriptive Anatomy, Surgical Anatomy, General Anatomy, Philosophie Anatomy. “Anatome sola est quæ Dei vias et relictæ, ut Moses ait, vestigia speculatur et norit.”—M. A. SEVERIN. Translated from the original French. By R. WILLIS, Member of the Royal College of Surgeons in London, and of the Medical and Chirurgical Society. Published in numbers. Folio. Paris, 1833, 1836.

The plates are lithographic, and extremely well executed. They are well adapted to illustrate the anatomy of the human body.

17. COOPER, B. B.—*Lectures on Anatomy, interspersed with Practical Remarks.* By B. B. COOPER, F. R. S., Surgeon to Guy's hospital, Lecturer on Anatomy, &c. &c. &c. In four volumes. Vol. I, Lond. 1829; pp. 310. Vol. II, 1830; pp. 308. Vol. III, 1831; pp. 300; and Vol. IV, 1832; pp. 383.

This work is designed mainly to be a union of descriptive anatomy with surgical remarks; the plan of which,—the author says,—was suggested by his uncle, Sir Astley Cooper. The *first* volume comprises the anatomy, physiology, &c. of the osseous system, of the parts essential to the skeleton; and of the skeleton in general; the *second*, the anatomy of the muscular system, and of cellular membrane; the *third*, of the mucous and serous membranes; and of the thoracic and abdominal viscera. This volume has five plates. 1. Of the fasciæ spermaticæ given off from the rings of the inguinal canal. 2. A diagram of the structure of the testicle. 3. Diagrams. *a.* Of the progressive distention of the bladder—the pelvis in the position of the erect posture of the body. *b.* Of the side view of the pelvis in the erect posture of the body. *c.* Of the bladder to show the course of the sound, when taken from the assistant by the operator, and the consequent elevation of the prostate from the rectum. The *fourth* volume is on the arteries, veins, absorbent system, nervous system, and the organs of the senses. This volume contains four plates,



1. The earliest appearance of the brain and spinal marrow twice the natural size, from a fœtus of seven weeks, and the two principal cords of the spinal marrow separated, to show the continuity of the canal with the fourth ventricle; view of the under surface of the brain, according to the mode of dissection adopted by Dr. FOVILLE, &c. 2. The upper surface of the brain, the hemispheres being separated; and a front view of a traverse section of the brain, opposite to the coronal suture. 3. Diagram of a side view of the same dissection, produced by a vertical section from the centre of the corpus collosum to the base of the brain, and a diagram, in which the situation of the ganglia of Drs. GALL and SPURZHEIM are seen, &c. &c. The processes and sinuses of the dura mater; and sinuses in the internal part of the basis of the cranium.

18. LIZARS, JOHN.—*A System of Anatomical Plates of the Human Body; accompanied with Descriptions, and Physiological, Pathological, and Surgical Observations.* By JOHN LIZARS, F. R. S., Fellow of the Royal College of Surgeons; corresponding Member of the Medical Society of Emulation of Paris; and Lecturer on Anatomy and Surgery at Edinburgh. Dedicated by permission to the King. Letter press, 8vo. Plates, large folio. Parts 12. Edinburgh, 1822 to 1826.

An excellent system of plates; with accurate and valuable descriptions. Part 1, contains eight plates of the bones. P. 2. Ten, of the blood-vessels and nerves of the head and trunk. 3. Ten, of the blood-vessels and nerves of the upper and lower extremities. 4. Eight, of the muscles of the trunk, and two supplemental plates illustrative of hernia. 5. Seven, of the muscles and joints of the upper and lower extremities. 6. Ten, of the muscles and joints of the lower extremity. 7. Seven, of the human brain. 8. Eight, of the human brain. 9. Ten, of the organs of sense. 10. Eight, of the organs of sense and viscera of the thorax and abdomen. 11. Seven, of the abdominal viscera, and male and female organs of generation. 12. Seven, of the gravid uterus and lymphatics.

The plates are beautifully and clearly engraved on copper.

19. TUSON, WILLIAM E.—*The Dissector's Guide; or Student's Companion. Illustrated by numerous Woodcuts, clearly Exhibiting and Explaining the Dissection of every Part of the Human Body.* By EDWARD WILLIAM TUSON, F. L. S., Member of the Royal College of Surgeons in London, Lecturer of Anatomy and Physiology at the Little Windmill Street School; Author of "Myology," "a Sup-

plement to Myology," "a pocket Compendium of Anatomy," &c. &c. Small 8vo. pp. 219. London, 1832.

The marginal illustrations are numerous, and several of them well executed. The letter press is perspicuous and sufficient.

### c. GENERAL ANATOMY.

#### 1. Reprinted in this country.

20. BAYLE, A. L. J. and HOLLARD, H.—*A Manual of General Anatomy, containing a concise description of the Elementary Tissues of the Human Body.* From the French of A. L. J. BAYLE, and H. HOLLARD. By S. D. GROSS, M. D. 8vo. pp. 272.

A useful Manual, but somewhat too brief. The Translator, who seems to have rendered justice to his principals, is now Professor in the Cincinnati Medical College.

A Translation of the same work, by H. Storer, was published in London, in 1829.

21. BECLARD, P. A.—*Elements of General Anatomy, or a description of every kind of Organs composing the Human Body.* By P. A. BECLARD, Professor of Anatomy of the Faculty of Medicine of Paris. Preceded by a critical and biographical memoir of the life and writings of the Author. By OLIVIER, M. D. Translated from the French with notes, by JOSEPH TOGNO, M. D., Member of the Philadelphia Medical Society. 8vo. pp. 541. Philadelphia, 1830.

An excellent work. It considers, in turn, the character of organised bodies—the cellular and adipose tissues—the serous membranes—the tegumentary membranes—the vascular system—the glands—the ligamentous tissue—the cartilages—the osseous system—the muscular system—the nervous system—and accidental productions, including foreign animated bodies.

Dr. Togno is not the only translator. An English version has been published by Dr. Knox. Dr. Togno's is the more accurate, but it is blemished by numerous gallicisms.

22. BICHAT, X.—*General Anatomy, applied to Physiology and Medicine,* by XAVIER BICHAT, Physician of the Great Hospital of Humanity at Paris, and Professor of Anatomy and

Physiology. Translated from the French, by GEORGE HAYWARD, M. D., Fellow of the Academy of Arts and Sciences, and of the Massachusetts Medical Society. In three volumes. 8vo. pp. 454, 420, 479. Boston, 1822.

The great work of him, who may, perhaps, be considered as the *inventor* of General Anatomy.

*Additions to the General Anatomy of XAVIER BICHAT.* By P. A. BECLARD, Professor of Anatomy and Physiology to the Faculty of Medicine of Paris, &c. Translated from the French, by GEORGE HAYWARD, M. D., Fellow of the American Academy of Arts and Sciences, and of the Massachusetts Medical Society. 8vo. pp. 328. Boston, 1823.

These additions were incorporated into an edition of Bichat's General Anatomy, published in Paris, in 1821, but many copies were issued in a separate form for the benefit of those who had previously possessed the works of Bichat.

## 2. *Not Reprinted.*

23. CRAIGIE, DAVID.—*Elements of General and Pathological Anatomy, adapted to the present state of Knowledge in that science.* By DAVID CRAIGIE, M. D. 8vo. pp. 816. Edinburgh, 1828.

Dr. CRAIGIE's volume contains much important information, culled from British and continental sources more especially. In its pathological portion, it is confessedly imperfect,—there being little or no notice of local diseases, or of those varieties of malformation, which consist in misapplications of the component parts of organs, or of the morbid changes of the glandular system.

24. GRAINGER, R. D.—*Elements of General Anatomy, containing an Outline of the Organization of the Human Body.* By R. D. GRAINGER, Lecturer on Anatomy and Physiology. 8vo. pp. 526. London, 1829.

This work is not strictly confined to topics of general anatomy. The introduction is divided into nine sections. 1. Of Inorganic and Organic Bodies. 2. Of Vegetables and Animals. 3. Of Animal Organization. 4. Of the Human Body. 5. Of the Fluids. 6. Of the Solids. 7. Of the Functions. 8. Of the Development of Organization, and 9. Of Death and its Consequences.—The chapters are on the following subjects. 1. Of the Cellular and Adipose Tissues. 2. Of the Serous Membranes. 3. Of the Cutaneous System. 4. Of the Vascular System. 5. Of the Glandular System. 6. Of the Cartilagi-

nous System. 7. Of the Fibrous System. 8. Of the Fibrocartilaginous System. 9. Of the Osseous System. 10. Of the Muscular System. 11. Of the Nervous System.

Embracing, as it does, the physiological relations of the different systems that compose the organism, the work is too brief. It is little more, indeed, than a syllabus of a subject, on which the author's information could have enabled him to expatiate with advantage.

#### d. PATHOLOGICAL ANATOMY.

##### 1. *American.*

25. HORNER, W. E.—*A Treatise on Pathological Anatomy.* By WILLIAM E. HORNER, M. D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c. 8vo. pp. 460. Philadelphia, 1829.

The work is divided into twenty-five chapters. 1. General Considerations on Disease. 2. On the Forms of Disease. 3. Phenomena of Irritation. 4. Sympathies. 5. Irritations of Cellular Tissue. 6. Irritations of Serous Membranes. 7. Irritations of Mucous Membranes. 8. Chronic Inflammation of Mucous Tissues. 9. Mollescence of Mucous Membranes. 10. On the Healthy and Diseased Appearances of the Gastro-Intestinal Mucous Membrane. 11. On Follicular Inflammation of the Gastro-Intestinal Mucous Membrane. 12. Dissections illustrating the Pathology of the Abdomen. 13. Irritations of the Pulmonary Tissue. 14. Phthisis Pulmonalis. 15. Irritations of the Heart. 16. Irritations of the Heart continued. 17. Irritations of the Heart continued. 18. Dissections of the Thorax. 19. General Pathology of the Nervous System. 20. Irritations of the Encephalon. 21. Irritations of the Encephalon continued. 22. Mollescence of the Encephalon. 23. Irritations of the Medulla Spinalis. 24. Irritations of the Nerves; and 25. Dissections illustrating the Pathology of the Nervous System.

Numerous cases are given by the author, and four plates, three of which are elucidative of the pathology of the gastro-enteric mucous membrane; the fourth represents the morbid appearances in a case of croup.

##### 2. *Reprinted.*

26. ANDRAL, G.—*A Treatise on Pathological Anatomy.* By G. ANDRAL, Professor to the Faculty of Medicine of Paris,

Member of the Royal Academy of Medicine, of the Council of Health, &c. &c. Translated from the French, by Richard Townsend, A. B., M. D., M. R., I. A., and William West, A. M., M. D., M., R., I. A. 2 vol. pp. 424, and 507. New York, 1832.

An excellent work, by a first rate observer. The translation was undertaken by Dr. TOWNSEND, at the request of the author, who had proceeded only so far as the commencement of the article on Tubercles, when, being obliged to go to the continent of Europe, the completion and publication of the first volume was referred to Dr. WEST. In the second volume all the articles were translated by Dr. WEST, except those on the morbid alterations of the circulatory and respiratory apparatuses, which were translated by Dr. TOWNSEND.

The translation is very creditably executed. The first volume comprises the "general," and the second, the "special" pathological anatomy.

27. BAILLIE, MATTHEW.—*The Morbid Anatomy of some of the most Important Parts of the Human Body.* By MATTHEW BAILLIE, M. D., F. R. S., Physician Extraordinary to the King, Fellow of the Royal College of Physicians in London, and Honorary Fellow of the Royal College of Physicians in Edinburgh, &c. &c. &c. Third American from the fifth London edition. 8vo. pp. 288. Philadelphia, 1820.

This work has been long highly appreciated. It is now greatly superseded by the labours of more modern investigators. The American reprint does not contain the plates.

28. BICHAT, X.—*Pathological Anatomy.* The last course of XAVIER BICHAT, from an autographic manuscript of P. A. BECLARD, with an account of the life and labours of BICHAT. By F. G. BOISSEAU, Member of the Royal Academies of Medicine of Paris and Madrid, of the Medical Society of Emulation, &c. Translated from the French, by JOSEPH TOGNO, Student of Medicine. 8vo. pp. 232. Philadelphia, 1827.

A posthumous production, which would probably never have seen the light, in its present shape, had its celebrated author lived. The *Bibliopole*, BAILLIERE,—having become possessed, at the sale of the library of Professor BECLARD, of a manuscript, written by him, of the last course of lectures of BICHAT,—determined—with the advice of several enlightened physicians, who thought "that the smallest part of the



doctrine of a man who has rendered such eminent services to science and humanity, should be collected with religious care"—to publish it.

The pathological notices are brief, and by no means satisfactory. They range through the different morbid conditions that 'flesh is heir to.'

29. MORGAGNI, J. B.—*The Seats and Causes of Diseases, Investigated by Anatomy—Containing a Great Variety of Dissections, and accompanied with Remarks.* By JOHN BAPTIST MORGAGNI, Chief Professor of Anatomy, and President of the University of Padua. Abridged and elucidated with copious notes. By WILLIAM COOKE, Member of the Royal College of Surgeons, London; and one of the Secretaries to the Hunterian Society. In two vols. 8vo. pp. 519 and 616. Boston, 1824.

An excellent work, the original of which has always borne a high reputation. It is an abridgement of the treatise "De Sedibus et Causis Morborum," a work known in every country where medical science is at all attended to.

The elucidations of Mr. Cooke add greatly to the value of the whole.

### 3. Not Reprinted.

30. CARSWELL, ROBERT.—*Illustrations of the Elementary Forms of Disease.*—By ROBERT CARSWELL, M. D., Professor of Pathological Anatomy in the University of London, &c. &c. folio.

Several fasciculi of this splendid and excellent pathological work have been published, embracing the subjects of Tubercles, Carcinoma, Melanoma, Softening, Hemorrhage, Mortification, Pus, Hypertrophy, Atrophy, &c.

The representations of disease are admirable, and the text not less worthy of consideration. Each fasciculus contains four plates.

31. HOPE, J.—*Principles and Illustrations of Morbid Anatomy, Adapted to the Elements of M. ANDRAL, and to the Cyclopedia of Practical Medicine, being a complete series of coloured Lithographic Drawings, from Originals, by the Author; with Descriptions and Summary Allusions to Cases, Symptoms, Treatment, &c., designed to constitute an Appendix to Works on the Practice of Physic, and to facilitate the Study of Morbid Anatomy, in connection*

*with Symptoms.* By J. HOPE, M. D., F. R. S., Physician to the St. Marylebone Infirmary, Mem. Hon. de la Société de Statistique Universelle; Extraord. Mem., and formerly President of the Royal Medical Society, Ed. &c.

“Segnius irritant animos demissa per aurem,  
Quam quæ sunt oculis subjecta fidelibus, et quæ  
Ipse sibi tradit spectator.” HORACE, *De Arte Poetica*.

large 8vo. pp. 394.

A brief account of the pathological anatomy of the pulmonary parenchyma, air-passages, heart, liver, and biliary apparatus, alimentary canal below the diaphragm, peritoneum, uterine system, kidneys, bladder, spleen, brain and spinal cord. The cases detailed, which are numerous, fell under the author's care, chiefly in the Marylebone Infirmary—an extensive institution.

The plates, which comprise two hundred and sixty figures, are perhaps the best part of the work. They are beautifully designed, and the coloring is excellent.

32. MONEY, W.—*A Vade Mecum of Morbid Anatomy, Medical and Chirurgical; with Pathological Observations and Symptoms. Illustrated by upwards of two hundred and fifty drawings.* By W. MONEY, Surgeon to the Asylum for the Recovery of Health, Member of the Medical Board of the Royal Sea Bathing Infirmary, Margate, of the Medico-Chirurgical Society of London, Late Senior Surgeon of the Royal Metropolitan Infirmary for sick children, and formerly House Surgeon to, and Teacher of Anatomy at, the General Hospital, Northampton. Second Edition. 8vo. pp. 51. London, 1831.

This work contains observations on, with illustrations of, the changes of structure met with in the brain, thoracic, abdominal, and pelvic viscera, and in the organs of generation in both sexes, with the symptoms, and morbid appearances observed on dissection.

The subjects of the plates, which are forty-eight in number, are as follows: Pl. 1 to 12, Morbid appearances of the brain. 13 to 15, Morbid appearances of the fauces and gullet. 15 to 24, Of the trachea, lungs, and pleura. 25 to 30, Of the pericardium, heart, and aorta. 31 to 36, Of the serous and mucous texture of the stomach, and of the spleen. 37 to 38, Of the serous and parenchymatous texture of the liver and gall-bladder. 39 and 40, Of the serous and mucous texture of the intestines; of intus-susceptio and hernia. 41 to 43, Abscess, softening, and calculi of the kidneys and ureters.

- 44 to 46, Of the bladder, prostate gland and vesiculæ seminales.  
 47, Cancer, tubercles, and hydatids of the uterus and its appendages.  
 48, Hydatids, encephaloid and scirrhus testicle.

The figures are lithographed and colored.

33. OTTO, A. W.—*A Compendium of Human and Comparative Pathological Anatomy*. By ADOLPH WILHELM OTTO, M. D., Royal Medical Counsellor in the Medical College of Silesia, Ordinary Professor of Medicine in the University and Medico-Chirurgical Academy at Breslau, &c. &c. Translated from the German, with additional notes and references. By JOHN F. SOUTH, Lecturer on Anatomy at St. Thomas's Hospital. 8vo. pp. 456. Lond. 1831.

Contains much useful matter, especially as regards the literature of the subject, written before the productions of Craigie and Andral. The *first* part treats of the vices of animal organization in general, and the *second* of the particular organs or organic systems.

Many valuable notes are added by the translator.

#### c. SURGICAL ANATOMY.

*Reprinted in this country.*

34. BLANDIN, PH. FRED.—*A Treatise on Topographical Anatomy, or the Anatomy of the Regions of the Human Body, considered in its relations with Surgery and Operative Medicine. With an Atlas of twelve Plates*. By PH. FRED. BLANDIN, Professor of Anatomy and Operative Medicine, &c. Translated from the French, by A. SIDNEY DOANE, A. M., M. D. With additional matter and plates. Large 8vo. pp. 367.

A good work. The plates are:—1. Perpendicular section of the head and neck, to show the relative situations of the cavities of the nose, mouth, larynx, and pharynx. 2. The eye, (to illustrate those parts most commonly concerned in surgical operations.) 3. View of the superficial anatomy of the neck. 4. View of the deep-seated anatomy of the neck. 5. Front view of the axilla, the arm being slightly elevated. 6. The axilla viewed from below—the arm being strongly elevated. 7. The anterior aspect of the region of the elbow, in which the veins have been strongly injected, to show, by their nodosities, the comparative number of valves in the superficial and deep-

seated veins. 8. The fingers. 9. Inguinal and crural canals, seen externally. 10. Posterior view of the anterior abdominal paries, to show the superior orifices of the inguinal and crural canals; and also a perpendicular and transverse section of the pelvis, to show the internal iliac region and the connection of the perineal aponeurosis with the aponeuroses of the cavity of the pelvis. 11. Interior of the perineum and cavity of the pelvis, to show their aponeuroses. 12. Parts concerned in crural hernia. 13. View of the perineum in the male. 14. Section parallel to the axis of the body; of the perineum, of the pelvic portion of the anterior abdominal parietes, and of the posterior sacral region, made a little to the outer side of the median line. 15. Genito-urinary organs in the female. 16. View of the ham or popliteal space.

Four of these were added by the American translator.

45. COLLES, ABRAHAM.—*Treatise on Surgical Anatomy*. By ABRAHAM COLLES, one of the Professors of Anatomy and Surgery in the Royal College of Surgeons in Ireland, &c. &c. Second American edition. With Notes by J. P. HOPKINSON, M. D., Demonstrator of Anatomy in the University of Pennsylvania, and Lecturer on Anatomy in the School of Medicine. 8vo. pp. 186. Philadelphia, 1831.

The topics, embraced in Professor COLLES's work, are—The anatomy of inguinal hernia, of femoral hernia, umbilical hernia, of the abdomen, of the thorax, of the neck and throat, of the pelvis, of the external organs of generation, of the perineum, and of the bladder; with remarks on passing the catheter, and on the operation of lithotomy; and a preliminary address to the pupils of the Royal College of Surgeons in Ireland, on the preparatory education necessary for the surgical student.

36. EDWARDS, H. M.—*A Manual of Surgical Anatomy, containing a Minute Description of the Parts concerned in Operative Surgery, with the Anatomical Effects of Accidents, and instructions for the Performance of Operations*. By H. M. EDWARDS, D. M. P. Translated, with Notes, by WILLIAM COULSON, Demonstrator of Anatomy at the Medical School, Aldersgate Street, &c. First American, from the first London edition, revised and corrected, with additional Notes, by JAMES WEBSTER, M. D., Lecturer on Anatomy and Surgery, &c. 12mo. pp. 382. Philadelphia, 1828.

A useful manual, investigating *seriatim* the surgical anatomy of—

1. The superior region of the head. 2. The naso-orbital region. 3. The maxillary region. 4. The auricular region. 5. The anterior cervical region. 6. The posterior cervical region. 7. The anterior thoracic region. 8. The posterior thoracic region. 9. The region of the shoulder. 10. The middle region of the arm. 11. The region of the hand. 12. The anterior region of the abdomen. 13. The lumbar region. 14. The pelvic region. 15. The region of the hip or coxo-femoral region. 16. The region of the knee and leg. 17. The region of the foot.

37. VELPEAU, A. A. L. M.—*A Treatise on Surgical Anatomy; or the Anatomy of Regions, considered in its Relations with Surgery*.—Illustrated by Plates, representing the Principal Regions of the Body. By ALF. A. L. M. VELPEAU, M. D. P. Agrégé Stagiaire to the Faculty of Medicine of Paris, &c. In two volumes, 8vo. Translated from the French, with additional Notes, by JOHN W. STERLING, M. D., Member of the Royal College of Surgeons in London, Fellow of the College of Physicians and Surgeons of the University of New York, &c. &c. pp. 456, 523. New York, 1830.

An excellent work.—The *first* volume canvasses the surgical anatomy of the head, neck, thoracic extremities, and chest: the *second*, that of the abdomen, pelvis, and pelvic extremities. The plates are lithographic, and fourteen in number. They embrace the following subjects. 1. The anterior and posterior regions. 2. A vertical section of the head and of the anterior paries of the larynx. 3. The fore part of the neck, separated from the head and the thorax. 4. The supra-clavicular region. 5. Axillary region. 6. The anterior region of the elbow, showing the disposition of the organs, which may be concerned in the operation of venesection. 7. Inguinal region. 8. Do. another view, showing especially the epigastric and crural vessels in their relation with the spermatic cord, Poupart's ligament and the fascia lata. 9. Iliac fossæ and interior of the pelvis. 10. Ano-perineal region. 11. Another view, showing the relations of the rectum, prostate, bladder, and origin of the urethra. 12. Interior of the pelvis from a perpendicular section. 13. Vertical section of the pelvis and of the genito-urinary organs, relative to the operation of lithotomy; and, lastly, the most important parts of the ham or of the popliteal region.

#### f. ANATOMICAL PREPARATIONS.

##### 1. American.

38. PARSONS, USHER.—*Directions for Making Anatomical Prepa-*



*rations, Formed on the Basis of POLE, MARJOLIN and BRESCHET, and including the new methods of Mr. SWAN.* By USHER PARSONS, M. D., Professor of Anatomy and Surgery. 8vo. pp. 316. Philadelphia, 1831.

A useful work, containing the method of making dry preparations of the blood-vessels; corroded preparations; quicksilver injections and preparations; preparations by distention; wet preparations; preparation and preservation of the brain and nerves; macerated preparations; articulations and sections of the skeleton; Mr. Swan's new method of making dried anatomical preparations; modelling; with the mode of preserving animals. There are four plates. I. Representing the brass syringe, with its several appendages, for injecting with coloured fluids. II. The injecting tube, and its appendages, for filling the lymphatics, lacteals, &c., with quicksilver. III. The injecting tray, and its appendages, for facilitating the process of quicksilver injections; and IV. A representation of several moulds in plaster of Paris, to illustrate the method of constructing them on hard and inflexible substances.

2. *Not Reprinted.*

39. SWAN, JOSEPH.—*A new method of making anatomical preparations, particularly those relating to the Nervous System.* By JOSEPH SWAN. Third edition, considerably enlarged.

“Servetur ad imum,

Qualis ab incepto processerit, et sibi constet.”

HOR. DE ARTE POET.

8vo. pp. 111. London, 1833.

The success, which this work has met with, is a sufficient proof of its merits. It contains twenty-five chapters; embracing the different methods of making preparations of human and animal anatomy; varnishes and paints, injections, &c.

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## II. MEDICAL BIBLIOGRAPHY.

*Not Reprinted.*

40. FORBES, JOHN.—*A Manual of Select Medical Bibliography, in which the Books are Arranged Chronologically, according to the Subjects, and the Derivations of the Terms, and*

*the Nosological and Vernacular Synonymes of the Diseases are given. With an Appendix, containing lists of the Collected Works of Authors, Systematic Treatises on Medicine, Transactions of Societies, Journals, &c. &c. &c.* By JOHN FORBES, M. D., F. R. S., one of the Editors of the Cyclopædia of Practical Medicine, and of the British and Foreign Medical Review. Royal 8vo. pp. 403. London, 1835.

A pendant to the "Cyclopædia of Practical Medicine," of which the author was one of the distinguished editors. Like that work, the Bibliography is restricted to subjects of *practical* medicine. The titles of the works are given, but no account of their contents.

41. YOUNG, THOMAS.—*An Introduction to Medical Literature, Including a System of Practical Nosology. Intended as a Guide to Students, and an Assistant to Practitioners. Together with Detached Essays on the Study of Physic, a Classification of Chemical Affinities, on Mineral Chemistry, on the Blood, on the Medical Effects of Climates, on the Circulation, and on Palpitation.* By THOMAS YOUNG, M. D., F. R. & L. S., Fellow of the Royal College of Physicians, and Physician to St. George's Hospital. The second edition, continued and corrected. 8vo. pp. 659. London, 1823.

Chiefly bibliographical. The essays on the study of physic are very brief.

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### III. CHEMISTRY.

#### *a. American.*

42. GREEN, JACOB.—*A Text Book of Chemical Philosophy, on the Basis of Dr. TURNER's Elements of Chemistry; in which the Principal Discoveries and Doctrines of the Science are Arranged in a New Systematic Order.* By JACOB GREEN, M. D., Professor of Chemistry in Jefferson Medical College. 8vo. 616. Philadelphia, 1829.

The text book of the author to his lectures in Jefferson Medical

College: It is divided into four parts,—Part 1. Treating of the powers and properties of matter. 2. Of imponderable matter. 3. Ponderable matter. 4. Organic chemistry. 5. Analytical chemistry.

The appendix contains:—1. Table of precipitates with an infusion of galls. 2. Table of precipitates with ferrocyanate of potassa. 3. Table of gaseous combinations and volumes. 4. Table of equivalents or atomic weights.

The author is preparing a new edition, which will bring up the subject of the work to the present day.

43. HARE, ROBERT.—*A Compendium of the Course of Chemical Instruction in the Medical Department of the University of Pennsylvania.* By ROBERT HARE, M. D., Professor of Chemistry. Printed for the Use of his Pupils. Third edition, edited in the absence of the Author, by Franklin Bache, M. D. 8vo. pp. 530. Philadelphia, 1836.

This is the text book to the lectures delivered by the author in the University of Pennsylvania. It treats of the chemistry of both inorganic and organised bodies,—briefly, of course, except in the experimental relations, on which it is full. The graphic illustrations are very numerous. It does not contain any account of voltaic electricity, galvanism or electro-magnetism. For these subjects, Dr. Hare refers the student to Turner's Chemistry.

44. SILLIMAN, BENJAMIN.—*Elements of Chemistry, in the Order of the Lectures given in Yale College.* By BENJAMIN SILLIMAN, Professor of Chemistry, Pharmacy, Mineralogy and Geology. In two volumes. 8vo. pp. 518, 696. New Haven, 1831.

A work containing much valuable matter, but too voluminous as an accompaniment to the student. The arrangement of the author is not happy; the main reason, which he assigns for concluding the second volume with galvanism, is—that it forms a brilliant termination to the course!

45. WEBSTER, JOHN W.—*A Manual of Chemistry, on the Basis of Professor Brande's; containing the Principal Facts of the Science, arranged in the Order in which they are Discussed and Illustrated in the Lectures at Harvard University, N. E. Compiled from the Works of Brande, Henry, Berzelius, Thomson, and others.* Designed as a text book, for the use of students, and persons attending lectures on chemistry. By JOHN W. WEBSTER, M. D.,

Lecturer on Chemistry in Harvard University. 8vo. pp. 603. With plates of apparatus, &c. Boston, 1826.

Very good at the time at which it was published; but now *passé*.

*b. Reprints of Foreign Works.*

46. HENRY, WILLIAM.—*The Elements of Experimental Chemistry*. By WILLIAM HENRY, M. D., F. R. S., Vice-President of the Literary and Philosophical and Natural History Societies of Edinburgh; the Medico-Chirurgical and Geological Societies of Manchester; Member of the Royal Medical and Wernerian Societies of Edinburgh; the Medico-Chirurgical and Geological Societies of London; the Physic Society of Jena; the Natural History Society of Moscow; the Literary and Philosophical Society of New York, &c. &c. The 10th edition, comprehending all the recent discoveries, and illustrated with ten Plates by Lowry, and several engravings on wood. In two vols. pp. 666 and 731. Lond. 1826.

An admirable work for the closet; but not so well adapted for a text book. An American reprint of this edition was published some years ago.

47. PARIS, JOHN AYRTON.—*The Elements of Medical Chemistry; embracing only those Branches of Chemical Science, which are Calculated to Illustrate or Explain the Different Objects of Medicine; and to furnish a Chemical Grammar to the Author's Pharmacologia*. Illustrated by numerous Engravings on wood. By JOHN AYRTON PARIS, M. D., F. R. S., F. L. S., Fellow of the Royal College of Physicians of London; Honorary Member of the Board of Agriculture; Fellow of the Philosophical Society of Cambridge; and of the Royal Medical Society of Edinburgh; and late Senior Physician to the Westminster Hospital. "The objects of science are so multiplied that it is high time to subdivide them. Thus the numerous branches of an overgrown family in the patriarchal ages found it necessary to separate; and the convenience of the whole, and the strength and increase of each branch, were promoted by the separa-

tion." PRIESTLEY.—8vo. pp. 597. London, 1825, and Philadelphia, 1826.

Never much used. Now, much behind the present state of the science.

48. TURNER, EDWARD.—*Elements of Chemistry, including the Recent Discoveries and Doctrines of the Science.* By EDWARD TURNER, M. D., F. R. S., L. and E.; Sec. G. S.; Professor of Chemistry in the University of London; Fellow of the Royal College of Physicians of Edinburgh; Corresponding Member of the Royal Society of Göttingen; Honorary Member of the Plinian Society of Edinburgh; and Member, and formerly President, of the Royal Medical Society of Edinburgh. 5th American from the 5th London edition. With Notes and emendations. By FRANKLIN BACHE, M. D., Professor of Chemistry in the Philadelphia College of Pharmacy; one of the Secretaries of the American Philosophical Society, &c. Philadelphia, 1835. Small 8vo. pp. 682.

An excellent work, and duly appreciated,—as its extensive sale in Great Britain, and this country sufficiently testifies. It is,—as the American editor remarks,—“the most popular manual of chemistry, that has yet been published in this country.”

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#### IV. CLINICAL INSTRUCTION.

*Works not reprinted in this country.*

49. LATHAM, P. M.—*Lectures on subjects connected with Clinical Medicine.* By P. M. LATHAM, M. D., Fellow of the Royal College of Physicians, and Physician to St. Bartholomew's Hospital. 12mo. pp. 322. London, 1836.

These lectures were delivered in Saint Bartholomew's Hospital. The first five contain some useful remarks on medical education and observation, and the remainder of the volume is occupied with Semeiology or the doctrine of symptoms, especially such as are afforded by Auscultation, with which Dr. Latham is very familiar.



50. LOUIS, P. CH. A.—*An Essay on Clinical Instruction.* By P. CH. A. LOUIS, M. D. Translated by PETER MARTIN, Member of the Royal College of Surgeons. London, 1833, pp. 33.

This pamphlet contains the views of the distinguished Author of the 'Numerical Method;' for—and against—which so much has been said. The method was embodied into a pamphlet, not originally intended for publication, but of which a translation was made, by permission of M. Louis, by Mr. Martin, one of his pupils.

Although not easy of application where the physician is engaged in extensive practice, the noting down of every fact connected with disease, pathologically or therapeutically—at the time of its occurrence—due attention being paid to every modifying influence, is doubtless the nearest approach to truth, which can be made. This every practitioner attempts to effect by a mental process as he proceeds from one door to another, but it is a very inadequate succeedaneum for the method recommended by M. Louis. The difference between the two may be elucidated by the plan pursued in certain of the high schools of this and other countries—of testing the relative qualifications of students by a written examination on subjects selected by the teacher. It is obvious, that the teacher can arrive at a more satisfactory approximation to relative merit, when he places a numerical valuation upon each paper and upon each part of the paper as he proceeds, than if he were to read over all the papers first, and then endeavor by a mental process to assign a value to each.

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## V. DICTIONARIES OF TERMS, &c.

### a. American.

51. COXE, J. R.—*The Philadelphia Medical Dictionary, containing a concise explanation of the terms used in Medicine, Surgery, Pharmacy, Botany, Natural History, Chemistry, and Materia Medica.* Compiled from the best authorities. by JOHN REDMAN COXE, M. D., Professor of Chemistry in the University of Pennsylvania. Second Edition. 8vo. pp. 433. Philadelphia, 1817.

The basis of this work—as Dr. Coxé remarks in his Preface—was Dr. Fox's "New Medical Dictionary, Revised and Augmented by

Dr. Bradley." It contains brief explanations of the terms in use up to the date of its publication, but pays no attention to etymology.

52. DUNGLISON, ROBLEY.—*A New Dictionary of Medical Science and Literature, containing a Concise Account of the various subjects and terms; with the Synonymes, in different languages, and Formulæ for various Official and Empirical Preparations, &c. &c.* By ROBLEY DUNGLISON, M. D., Professor of Physiology, Pathology, Obstetrics, and Medical Jurisprudence in the University of Virginia, Member of the American Philosophical Society, of the Royal College of Surgeons, of the Medical, Hunterian, and Apothecaries' Societies, of London; of the Medical, Pharmaceutic, and Linnæan Societies of Paris, of the Physico-Medical Society of Erlangen, of the Royal Society of Nancy, and of the Royal Academy, and Academic Medical Society, of Marseilles. In two volumes, 8vo. pp. 599, 640. Boston, 1833.

This Dictionary was suggested by the frequent complaints made by the author's pupils, that they were unable to meet with information on numerous topics of professional inquiry, especially of recent introduction, in the Medical Dictionaries accessible to them. It contains several thousand words more than that of HOOPER, with the Synonymes in Greek, Latin, French, and German. The Index to the Synonymes alone occupies 187 pages. To this Index the reader has to refer, when he does not meet with a term in its alphabetical situation in the body of the work.

*b. Reprints of Foreign Works.*

53. HOOPER, ROBERT.—*Lexicon Medicum, or Medical Dictionary: containing an Explanation of the terms in Anatomy, Botany, Chemistry, Materia Medica, Midwifery, Mineralogy, Pharmacy, Physiology, Practice of Physic, Surgery, and the various branches of Natural Philosophy connected with Medicine, selected, arranged, and compiled from the best authors.* "Nec aranearum sane texus ideo melior, quia ex se fila gignunt, nec noster vilior quia ex alienis libamus ut apes." JUST. LIPS. *Monit. Polit. Lib. I.*

cap. 1.—By ROBERT HOOPER, M. D., F. L. S. The fourth American, from the last London Edition, with additions from American authors on Botany, Chemistry, Materia Medica, Mineralogy, &c. By SAMUEL AKERLY, M. D., formerly Physician to the New York City Dispensary, Resident Physician to the City Hospital, late Hospital Surgeon United States Army, Physician to the New York Institution for the instruction of the Deaf and Dumb, &c. &c. In two volumes, 8vo. pp. 472, 415. New York, 1835.

This has long been the *chief*, if not the *only*, lexicon, employed by the American medical student. It is, however, far behind the existing state of medical science; is totally unfit for an accompaniment to the advanced student; and the fact of its being stereotyped renders it somewhat difficult to make it so. The exertions of the American editor have been mainly confined to rendering it more complete on subjects of natural science.

COOPER, S.—*Surgical Dictionary*. See under SURGERY.

*c. Not Reprinted.*

54. HOBLYN, R. D. *A Dictionary of Terms used in Medicine and the Collateral Sciences*. By RICHARD D. HOBLYN, M. A. Oxon. 12mo. pp. 330. London, 1835.

The object of this dictionary "is to present to the student, in a concise form, an explanation of the terms which are most used in medicine." Its peculiarity consists in classing many of the words according to their prefixes, suffixes, and radicals, as is done in the body of this work. The vocabulary of Mr. HOBLYN,—for vocabulary it must be called,—is, however, inadequate for the wants of the student, the definitions being generally too brief, and often faulty.

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## VI. ETHICS, (*Medical*.)

*Reprints of Foreign Works.*

55. GREGORY, JOHN.—*Lectures on the Duties and Qualifications of a Physician*. By JOHN GREGORY, M. D., F. R. S., late Professor of Medicine in the University of Edinburgh, and

First Physician to his Majesty in Scotland. Philadelphia. 1817. 12mo. pp. 232.

A well known and highly esteemed little volume; first published in the year 1772; but as fresh, in many of its applications, at the present day as it was at that time.

It treats of the utility and dignity of the medical art; the moral and intellectual qualities of the physician; his conduct in various trying situations; general views and principles, to be attended to in the investigation of nature; abuses in the study of natural science, &c. &c.

The lectures are six in number, and are well deserving of the perusal of every young physician and student.

56. PERCIVAL, THOMAS.—*Medical Ethics; or, a Code of Institutes and Precepts, adapted to the Professional Conduct of Physicians and Surgeons.* By the late THOMAS PERCIVAL, M. D., F. R. S., and A. S. Lond.; F. R. S. and R. M. S. Edinb., &c. &c. With additions illustrative of the past and present state of the profession and its collegiate institutions in Great Britain. Small 8vo. pp. 360. London, 1827.

An excellent work, which ought to be perused and reperused by every medical practitioner as well as student. The chapters are:—  
1. Of professional conduct; relative to hospital or other medical charities. 2. Of professional conduct in private, or general, practice. 3. Of the conduct of physicians to apothecaries—a chapter of no interest to practitioners on this side of the Atlantic.

## VII. HISTORY OF MEDICINE.

*Foreign Works not reprinted.*

57. BOSTOCK, J.—*Sketch of the History of Medicine, from its Origin to the Commencement of the Nineteenth Century.* By J. BOSTOCK, M. D., F. R. S., L. S., G. S., Ast. S., M. C. S., H. S., Z. S., M. R. I. Late Pres. of the Edinb. Med. Soc., Mem. Geol. Soc. Par. &c. Lond. 1835. 8vo. pp. 252.

This sketch is reprinted, with a few alterations, from the English ‘Cyclopædia of Practical Medicine.’ It is extremely imperfect—especially as regards the labors of the profession in this country, which are, indeed, passed over without notice.

It is prefixed to Dr. Doane’s edition of Good’s Study of Medicine.

58. HAMILTON, WILLIAM.—*The History of Medicine, Surgery, and Anatomy, from the Creation of the World, to the commencement of the Nineteenth Century.* By WILLIAM HAMILTON, M. B. “Ut alimenta sanis corporibus Agricultura, sic sanitatem ægris Medicina promittit. CELSUS. In two volumes, small 8vo. pp. 419. London, 1831.

An interesting work, well written and accurate in its details.

59. MOIR, D. M.—*Outlines of the Ancient History of Medicine; being a View of the progress of the Healing Art among the Egyptians, Greeks, Romans, and Arabians.* By D. M. MOIR, Surgeon. 12mo. pp. 278. Edinburgh and London, 1831.

The author's purpose was “to exhibit a sketch of the more prominent features in the annals of ancient medicine.” He has accomplished his task satisfactorily.

## VIII. HYGIENE.

### a. American Works.

60. DUNGLISON, ROBLEY.—*On the Influence of Atmosphere and Locality; Change of Air and Climate, Seasons, Food, Clothing, Bathing, Exercise, Sleep, Corporeal and Intellectual Pursuits, &c. on Human Health, constituting Elements of Hygiène.* By ROBLEY DUNGLISON, M. D., Professor of Materia Medica, Therapeutics, Hygiène, and Medical Jurisprudence, in the University of Maryland. 8vo. pp. 514. Philadelphia, 1835.

This work contains a physiological proem on the physical and vital properties of the tissues, the correlation of functions, natural differences amongst individuals, &c. &c. It then investigates the influence of atmosphere and locality on human health, inquiring into the effect of varied pressure, temperature, hygrometric state, vicissitudes, light, electricity, and atmospheric vitiations, including malaria; the comparative salubrity of different soils; and of civic and rural situ-



ations; the effect of change of air, and winds; of the heavenly bodies, and of the seasons, including the interesting question of choice of climate for the invalid. The subject of food, or the *materia alimentaria*, is then canvassed, and, in succession, clothing, bathing, exercise, sleep, and the mental and corporeal occupations. A supplementary chapter comprises a Deposition of the Author, involving questions regarding the effect of draining a malarious soil; tables of the mean temperature, and of the seasons, in different places in America, Europe, &c.; tables of the temperature of St. Augustine, &c., during certain months; mean temperature, &c. of corresponding months, in certain winter retreats, &c.; with a table of the comparative digestibility of different alimentary substances.

Of the manner in which the work is executed, the author is both precluded from speaking and judging.

61. TICKNOR, CALEB.—*The Philosophy of Living, or the way to enjoy Life and its Comforts*. “A man’s own observation, what he finds good of, and what he finds hurt of, is the best physic to preserve health.”—*Bacon*. By CALEB TICKNOR, A. M., M. D. New York, 1836. 12mo. pp. 334.

Addressed rather to the public than to the profession. It is the 77th number of ‘Harper’s Family Library.’ Chapter II. is on Diet, and is divided into eight sections. 1. Aliment. 2. Vegetable versus Animal Diet. 3. Food, Solid or Fluid. 4. Differences in Animal Food. 5. Mastication. 6. Quantity and Quality of Food. 7. Time of Eating. 8. Different Articles of Food.—Chapter III. considers Drinks, and is divided into two sections. 1. Alcoholic Drinks. 2. Tea and Coffee.—Chapter IV. is entitled ‘Of the Great Pleasure and Benefit of using Tobacco;’—the author arguing for the negative.—Chapter V. is on Dress, and is divided into three sections. 1. Small Waists and Tight Lacing. 2. Quantity of Clothing. 3. Material for Clothing.—Chapter VI. On the Management of Young Children. Sec. 1. Dress. 2. Food.—Chapter VII. Amusements. Sec. 1. Theatres. 2. Dancing.—Chapter VIII. Exercise. Sec. 1. Riding. 2. Walking.—Chapter IX. Education.—X. Of the Influence of the Mind and Body upon each other. Sec. 1. The Passions. 2. Imagination. 3. Religion. 4. Other Causes which Influence the Mind.—Chapter XI. Climate and Season.—Chapter XII. Air and Locality.—Chapter XIII. Temperament.—Chapter XIV. Age.—Chapter XV. Sex; and Chapter XVI. Marriage.

An appendix is added, containing, amongst other matters, the medicinal influences of an Italian climate, and an analysis of liquors.

62. BELINAYE, HENRY.—*The Sources of Health and Disease in*

*Communities; or Elementary Views of 'Hygiène,' illustrating its importance to legislators, heads of families, &c.* By HENRY BELINAYE, Esq., Surgeon Extraordinary to her Royal Highness the Duchess of Kent, &c. &c. "The benefits of this science are boundless; there is no action, no movement of man, in a state of society, which has not some claim upon its use. It is of all times, and of all places; it is the first and most sacred of magistracies, having ever for its object the happiness of mankind, and the repose and security of citizens." Boston, 1833. 12mo.

The object of this small volume,—as the author observes in his Preface,—is to direct public attention to an interesting branch of knowledge, which has not met with that consideration it merits. It is restricted more especially to the investigation of laws, institutions, habits, climates, &c. on the vigour and health of man; and, consequently, embraces 'public' rather than 'private' Hygiène.

The subjects considered are:—1. Remote physical influences,—those of the heavenly bodies, for example,—showing their active and continued operation on human existence. 2. The laws that influence propagation. 3. Emanations,—both those that arise naturally from the earth and its productions, and some of those that are elicited artificially. 4. Effluvia,—under which is considered the police of health, sources of disease &c. The bearings of civilization on human life—comprising the characteristics of political medicine.

63. COMBE, ANDREW.—*The Principles of Physiology applied to the Preservation of Health, and to the Improvement of Physical and Mental Education.* By ANDREW COMBE, M. D., Fellow of the Royal College of Physicians of Edinburgh. New York. 12mo. 1834. pp. 291.

This is an excellent production, intended, however, more for the people than for the profession. Its object, as expressed by the author, is "to assist in diffusing such a general acquaintance with the structure and functions of the human body, as will enable individuals to adopt the best means for developing their mental and bodily powers; to protect themselves from the more common causes of disease, and to co-operate with effect in the recovery of themselves or their friends, when sick;" and he adds—"In endeavouring partially to fulfil this object, I have the general reader alone in view, and do not pretend to offer any thing new to the profession, for the subjects treated of must be familiar to every practitioner. At the same time I am not with-

out hope, that the method followed of connecting details with practical applications, may be found useful to the student, and help to direct him in his future inquiries."

The physiological investigations embrace the functions of the skin, muscles, bones, respiration, and nervous system, with their various interesting applications to Hygiène. The reproductive functions are passed by. They could not, indeed, have easily been included in a work, which was intended to form part of the domestic library.

64. KITCHENER, WILLIAM.—*Directions for Invigorating and Prolonging Life: or the Invalid's Oracle. Containing Peptic Precepts, pointing out agreeable and effectual Methods to prevent and relieve Indigestion, and to regulate and strengthen the action of the Stomach and Bowels.* By WM. KITCHENER, M. D., Author of the Cook's Oracle, and Housekeeper's Manual, &c. &c. From the sixth London edition: revised and improved by T. S. BARRETT, Licentiate in Medicine and Surgery, Fellow of the New York Medical and Philosophical Society, &c. &c. New York, 12mo. pp. 252. 1831.

This work is circulated extensively amongst the people; but it is more conspicuous for its quaintness of style, and the strangeness of some of its inculcations, than for its accuracy. The topics discussed are—Art of Invigorating Life;—Reducing Corpulence;—Sleep;—Siesta;—Clothes;—Fire;—Influence of Cold;—Air;—Exercise;—Bathing;—Wine;—Peptic Precepts;—The Pleasure of Making a Will;—Extracts from Cornaro's Writings, &c.

The Notes of the American editor are sensible and appropriate. The section, on 'Bathing,' is entirely written by him.

### 3. Works not Reprinted.

65. GRANVILLE, A. B.—*The Catechism of Health; or plain and simple Rules for the Preservation of Health and the attainment of Long Life. To which are added, Facts respecting the Nature, Treatment, and Prevention of Cholera.* By A. B. GRANVILLE, M. D., F. R. S., F. L. S., F. A. S., F. G. S., M. R. I., &c. &c. 24mo. pp. 336. Lond. 1831.

This is one of the innumerable publications, to which the cholera gave rise. The first part is devoted to *physical education*, and in-

cludes. 1. Health and its blessings. 2. Infancy. 3. Childhood. 4. Air. 5. Exercise. 6. Sleep. 7. Food. 8. Drink. 9. Of smoking and snuff-taking. 10. Personal cleanliness. 11. Clothing. 12. Preservation of the external organs of sense. 13. How to avoid the effects of cold and dampness. 14. Means of securing the beauty and symmetry of the body, &c. The second part is entitled 'Division of Time—Diet'; and the third "Facts respecting the Nature, Treatment, and Cure of Cholera."

The appendix details some of the "undisputed laws which govern diseases in general."

66. HODGKIN, T.—*Lectures on the Means of Promoting and Preserving Health: delivered at the Mechanics' Institute, Spitalfields.* By T. HODGKIN, M. D. 18mo. pp. 449. London, 1835.

"These lectures," says the author, "are designed for that class of readers for whom the series of publications, styled the "WORKING MAN'S COMPANION," has been commenced by the Society for the Diffusion of Useful Knowledge." They are four in number;—the *first* embracing the subjects of air, light, cleanliness, bathing, clothing, &c.; the *second*—articles of food, solid and fluid, tobacco, quack medicines, &c.; the *third*, muscular motion and intellectual faculties; influence of particular trades; climate; gymnastics; brutalising sports; war; rest, &c. &c.; and the *fourth*, successive generations, and the education of youth. An appendix is added, containing hints to a young man coming to London; and a letter on vaccination.

The author is a member of the Society of Friends; and all his observations breathe the spirit of genuine philanthropy, and intelligence.

## IX. MATERIA MEDICA.

### 1. American.

67. BARTON, W. P. C.—*Outlines of Lectures on Materia Medica, and Botany, delivered in Jefferson College, Philadelphia.* By WM. P. C. BARTON, M. D. 12mo. pp. 246, 291. Philadelphia, 1828.

Intended by the author as a kind of syllabus, "to aid the student in the laborious task of taking notes."

The *first* volume is chiefly occupied with the Therapeutical consideration of the different classes of remedial agents. It contains also a full list of 'Incompatibles.' The *second* volume comprises the different articles of the Materia Medica, arranged alphabetically, with a brief account of the sensible and medical properties, doses, &c.

68. BIGELOW, JACOB.—*A Treatise on the Materia Medica, intended as a Sequel to the Pharmacopœia of the United States. Being an account of the origin, qualities, and Medical uses of the articles and compounds, which constitute that work, with their modes of prescription and administration.* By JACOB BIGELOW, M. D., Author of the American Medical Botany, and Professor of Materia Medica in Harvard University. 8vo. pp. 422. Boston, 1822.

The title sufficiently indicates the nature of the work. It is not much known.

69. CHAPMAN, N.—*Elements of Therapeutics and Materia Medica; to which are prefixed Two Discourses on the History and Improvement of the Materia Medica, originally delivered as Introductory Lectures.* By N. CHAPMAN, M. D., Professor of the Institutes and Practice of Physic, and Clinical Practice, in the University of Pennsylvania. "To communicate what I have tried, and leave the rest to others for farther inquiry, is all my design in publishing these papers."—*Newton*. In two volumes. Sixth edition, enlarged and revised. 8vo. pp. 370, 376. Philadelphia, 1831.

This work had, at one time, a considerable circulation, as the fact of its being in its sixth edition, in 1831, sufficiently indicates. It was used as a text-book in the University of Pennsylvania. The author's plan is to canvass first the general properties of a particular class of medicinal agents, and then to investigate those of the individual articles. His classification is, however, by no means perfect; several classes being omitted, of whose Therapeutical agency there can be no doubt. Those admitted are—Emetics, Cathartics, Diaphoretics, Diuretics, Lithontriptics, and Antilithics, Emmenagogues, Expectorants, Anthelmintics, Epispastics, Diffusible Stimulants, Narcotics, Antispasmodics, Tonics, and Astringents.

The author is a warm supporter of the doctrine, which maintains that vital medicinal agents act by sympathy, and by sympathy only.



70. COXE, J. R.—*The American Dispensatory, containing the Natural, Chemical, Pharmaceutical, and Medical History of the Different Substances employed in Medicine; together with the Operations of Pharmacy; illustrated and explained according to the Principles of Modern Chemistry; to which are added, Toxicological and other tables; the Prescriptions for Patent Medicines and various Miscellaneous Preparations.* Eighth edition, improved and greatly enlarged. By JOHN REDMAN COXE, M. D., Professor of Materia Medica and Pharmacy in the University of Pennsylvania, Member of the American Philosophical Society, &c. Philadelphia, 1831. 8vo. pp. 832.

Long a valued work—as the number of editions through which it has passed sufficiently shows.

71. EBERLE, J.—*A Treatise of the Materia Medica and Therapeutics.* By JOHN EBERLE, M. D., Member of the American Philosophical Society, of the Academy of Natural Sciences of Philadelphia, Corresponding Member of the Medico-Chirurgical Society of Berlin, &c. &c. In two volumes. Fourth edition, much enlarged and corrected. 8vo. pp. 450, 479. Philadelphia, 1834.

A useful work. The classification adopted by the author, which is by no means physiologically accurate or perfect, is I. Medicines that act specifically on the intestinal canal; in which he includes *Emetics, Cathartics, Anthelmintics, and Antacids.* II. Medicines whose action is principally directed to the muscular system—*Tonics, and Astringents.* III. Medicines that act specifically on the uterine system—*Emmenagogues and Abortives.* IV. Medicines whose action is principally directed upon the nervous system—*Narcotics and Antispasmodics.* V. Medicines whose action is principally manifested in the circulatory system—*Stimulants.* VI. Medicines acting specifically upon the organs of secretion—*Diaphoretics, Epispastics, Errhines, Emollients, Diuretics, Antilithics, and Sialogogues.* VII. Medicines that act specifically upon the respiratory organs—*Expectorants, Inhalations.* VIII. Medicines whose action is truly topical—*Emollients and Escharotics.*

72. ECLECTIC DISPENSATORY.—*The Eclectic and General Dispensatory: comprehending a System of Pharmacy, Materia Medica, the formulæ of the London, Edinburgh, and*

*Dublin pharmacopœias, prescriptions of many eminent Physicians, and receipts for the most common Empirical remedies; collated from the best authorities.* By an American Physician. 8vo. pp. 627. Philadelphia, 1827.

This is upon the plan of the other Dispensatories. It has seven plates of apparatus.

73. ELLIS, BENJAMIN.—*The Medical Formulary; being a collection of prescriptions, derived from the writings and practice of many of the most eminent Physicians in America and Europe. To which is added an Appendix, containing the usual Dietetic preparations and antidotes for poisons. The whole accompanied with a few brief Pharmaceutic and Medical observations.* By BENJAMIN ELLIS, M. D., Professor of Materia Medica and Pharmacy, in the Philadelphia College of Pharmacy. “*Morbos autem, non eloquentia sed remediis curari.*” *Ccls. De Med. Lib. I.* Second edition, with additions. 8vo. pp. 214. Philadelphia, 1829.

The author takes the different classes of medicines, *Emetics, Cathartics, &c.*, in turn; makes a few observations on their administration, and then gives formulæ. The work may be consulted with advantage by the young prescriber.

74. WOOD, GEO. B.—*The Dispensatory of the United States of America.* By GEO. B. WOOD, M. D., Professor of Materia Medica and Pharmacy in the University of Pennsylvania, Member of the American Philosophical Society, &c. &c., and FRANKLIN BACHE, M. D., Professor of Chemistry in the Philadelphia College of Pharmacy, one of the Secretaries of the American Philosophical Society, &c. &c. Third edition, enlarged and carefully revised. 8vo. pp. 1171. Philadelphia, 1836.

An excellent work, containing—in the body—all the officinal articles admitted into the American and British Pharmacopœias, and, in the Appendix, the properties of numerous drugs which have not been received into them. In plan it resembles the Dispensatories of Great Britain, but it is superior to any of them. It ought to be in every office, and the student cannot do better than attain the natural and

medical history of the various articles of the *Materia Medica* in its pages.

2. *Reprinted in this country.*

75. EDWARDS & VAVASSEUR.—*A Manual of Materia Medica and Pharmacy, comprising a concise description of the articles used in Medicine, their Physical and Chemical properties; the Botanical characters of the Medicinal plants; and the formulæ for the principal officinal preparations of the American, Parisian, London, Dublin, and Edinburgh Pharmacopæiæ; with Observations on the Proper Mode of Combining and Administering Remedies.* By H. M. EDWARDS, M. D. and P. VAVASSEUR, M. D. Translated from the French, with numerous additions and corrections, and adapted to the practice of Medicine, and the art of Pharmacy, in the United States. By JOSEPH TOGNO, M. D. Member of the Philadelphia Medical Society; and E. DURAND, Member of the Philadelphia College of Pharmacy. "I am neither for the ancients, nor for the moderns, but shall be of every age and nation."—*Baglivi*. 8vo. 523. Philadelphia, 1829.

A useful manual. The American editors have added "every important article belonging to the American medicinal plants, following, as closely as lay in their power, the method of the French authors."

76. MAGENDIE, F.—*Formulary for the Preparation and mode of Employing several New Remedies; namely, Morphine, Iodine, Quinine, Cinchonine, the Hydrocyanic Acid, Narcotine, Strychnine, Nux Vomica, Emetine, Atropine, Pierotoxine, Brucine, Lupuline, &c. &c. With an Introduction, and copious Notes.* By the late Charles Thomas Haden, Esq. Translated from the French of the third edition of Magendie's 'Formulaire.' Second edition; with numerous alterations and additions. By ROBLEY DUNGLISON, M. D., F. R. S. Nancy; F. L. S. Paris; Secretary for Foreign Correspondence to the Medical, and Member of the Hunterian, Society of London; of the Society of the Faculty of Physicians, and of the Pharmaceutical Society of Paris; of the Physico-Medical Society of the University

of Erlangen; the Academic Medical Society of Marseilles, &c. 12mo. pp. 154. Philadelphia, 1824.

*Appendix to the Formulary for the Preparation and mode of Employing several New Remedies; containing the Pharmaceutical and Therapeutical Properties of the Hydriodates of Potassa and Soda, the Ioduret of Mercury, the Cyanurets of Potassium and Zinc, the Oil of the Croton Tiglium, Piperine, Jalapine, &c.* By ROBLEY DUNGLISON, M. D., F. R. S. Nancy; F. L. S. Paris, &c. Translated from the French of the fourth edition of Magendie's 'Formulaire,' published in July, 1824. 12mo. pp. 48.

This edition was reprinted in this country; and, of late, an edition has been published from the 6th French, by Dr. HOULTON, and reprinted here. To it is added an appendix containing the experience of British practitioners with many of the new remedies.

The information, contained in these formularies, is now incorporated in the different recent publications on materia medica.

The value of the 'formulary' is sufficiently shown by the numerous translations of the successive editions.

77. MURRAY, JOHN.—*A System of Materia Medica and Pharmacy; including Translations of the Edinburgh, London, and Dublin Pharmacopœias.* By JOHN MURRAY, M. D., Fellow of the Royal College of Physicians, of the Royal Society of Edinburgh, the Geological Society of London, &c., Lecturer on Chemistry, and on Materia Medica and Pharmacy. From the fourth and last Edinburgh edition.\* With notes and additions, by JOHN B. BECK, M. D., Professor of Materia Medica in the University of the state of New York, corresponding Member of the Medical Society of London, &c. &c. 2 vols in one. 8vo. pp. 282, 278. New York, 1828.

A good 'system,'—the American edition comprising the indigentous articles, by the American editor.

78. PARIS, J. A.—*Pharmacologia.* Fourth American, from the seventh London edition. By J. A. PARIS, M. D., F. R. S., F. L. S., Fellow of the Royal College of Physicians of London, &c. &c. "Quis Pharmacopoico dabit leges, ig-

\* The sixth was published in 1832.

narus ipse agendorum? Vix profecto dici potest, quantum hæc ignorantia rei medicæ inferat detrimentum. GAUB. METHOD. CONCINN. FORMUL. With Notes and additions, by JOHN B. BECK, M. D., Professor of Materia Medica and Medical Jurisprudence in the University of the State of New York, corresponding Member of the Medical Society of London, &c. &c. 8vo. pp. 550. New York, 1831.

The historical introduction contains an analytical inquiry into the more remarkable causes, which have, in different ages and countries, operated in producing the revolutions that characterize the history of medicinal substances,—and is full of interest. The pharmacologia proper is divided into two parts. 1. On the operations of medicinal bodies, and on the classifications founded on them; followed by a dissertation on the theory and art of prescribing. Part 2. Comprehends the medicinal history and chemical habitudes of the different articles, that constitute the materia medica.

Amongst the additions, Dr. Beck has given the composition of some of the mineral springs of the United States, and the chief indigenous productions that are possessed of medicinal efficacy.

79. RATIER, F. S.—*A Practical Formulary of the Parisian Hospitals; exhibiting the Prescriptions Employed by the Physicians and Surgeons of those Establishments; with Remarks Illustrative of their Doses, mode of Administration, and Appropriate Application. Also, General Notices of each Hospital, the diseases it especially receives, and Medical Doctrines of the Practitioners who preside in it.* By F. S. RATIER, M. D., Doctor of Medicine of the Faculty of Paris, and corresponding Member of the Royal Medical Society of Bordeaux. Translated from the third edition of the French, with Notes and Illustrations, by R. D. McLELLAN, M. D. Licentiate of the Royal College of Surgeons. 18mo. pp. 262. New York, 1831.

Formularies appear to be amongst the most popular of medical writings. This little work has been edited by various persons, and has passed through several editions. The title page sufficiently indicates the nature of the contents.



3. *Not Reprinted.*

80. THOMSON, A. T.—*Elements of Materia Medica and Therapeutics; including the Recent Discoveries and Analyses of Medicines.* By ANTHONY TODD THOMSON, M. D., F. L. S., and G. S., Professor of Materia Medica and Therapeutics and of Medical Jurisprudence in the University of London, Member of the Royal College of Physicians, &c. &c. In two volumes, 8vo. pp. 747, and 694. London, 1832, 1833.

These 'elements' contain much valuable matter. The intention of the work—the author asserts—is “to present a *condensed* view of the branch of medical science, of which it treats”—an intention, which he has fulfilled in the goodly number of 1441 pages! This extension has arisen from a desire to incorporate into the work every thing, that can be regarded as elucidative of the subject, from the domains of natural history, botany, chemistry, anatomy, physiology, and, indeed, every department of science. Twenty-six pages, for example, of the first volume are occupied with an account of the ‘chemical elements of medicinal agents.’

These and other causes have prevented the work from being reprinted in this country. In England, it is in its second edition, in one volume.

## X. MEDICAL JURISPRUDENCE.

1. *American.*

81. BECK, T. R. and J. B.—*Elements of Medical Jurisprudence.* By THEODORIC ROMEYN BECK, M. D., Professor of the Institutes of Medicine, and Lecturer on Medical Jurisprudence, in the College of Physicians and Surgeons, of the Western District of the state of New York, &c. &c.; and JOHN B. BECK, M. D., Professor of Materia Medica and Medical Jurisprudence, in the College of Physicians and Surgeons, New York; one of the Physicians to the New

York Hospital, &c. &c. Fifth edition. In two volumes, 8vo. pp. 661, and 694. Albany, 1835.

This is the best work on the subject that has appeared. It has passed through four editions in England, and one in this country; and has received the commendations of the instructed every where. The references to the laws of different countries are accurately and succinctly stated; and the medico-legal facts and arguments are placed in such a manner as to convey the greatest amount of information. The subjects treated in the *first volume* are Feigned Diseases—Disqualifying Diseases—Impotence and Sterility—Doubtful Sex—Rape—Pregnancy—Delivery—Infanticide—Legitimacy—Presumption of Survivorship—Age and Identity—Insurance upon Lives and Mental Alienation. In the *second volume*—Persons found Dead—Wounds on the Living Body—Poisons, Irritant, Narcotic and Narcotico-Acid—and Medical Evidence.

2. *Reprinted in this Country.*

82. CHITTY, G.—*A Practical Treatise on Medical Jurisprudence, with so much of Anatomy, Physiology, Pathology, and the Practice of Medicine and Surgery, as are essential to be known by Members of Parliament, Lawyers, Coroners, Magistrates, Officers in the Army and Navy, and private gentlemen; and all the laws relating to Medical Practitioners; with explanatory plates.* By J. CHITTY, Esq., Barrister at Law. First American edition, with notes and additions, adapted to American works and Judicial decisions. Part I. large 8vo. pp. 509. Philadelphia, 1835.

A work on Medical Jurisprudence, or rather—in this volume—on Anatomy and Physiology, with their applications to Medical Jurisprudence—written by a lawyer, and, generally, well, and correctly written—the errors being few. It is divided into thirteen chapters. 1. Of the language of Anatomy, Physiology, Pathology, Surgery, Chemistry, and Medical Jurisprudence. 2. Of the Materials, Composition, Structure, Organs, Functions, Properties and Powers of the Human Frame in General. 3. Of the Skeleton and Bones, Joints, Cartilages, Ligaments, Synovial Membranes, Muscles and Tendons, and the Nerves, the Organs of the Function of Locomotion. 4. Of the Function of Respiration, and incidentally of Voice, Speech, and other Sounds, and the several effects of Respiration. 5. The Functions of Correlation. 6. The Function of Digestion, and its several Organs. 7. The Function of Absorption, its Organs and Parts. 8. The Function of Secretion, &c. 9. The Nervous Function, the External Senses,

&c., the Passions, Emotions, &c. 10. The Functions of Generation and Organs. 11. The Integuments, &c. 12. Of the Different Ages important in Fact and Law. 13. Of the Essentials for the Continuance of Health and Happiness, and how secured by law.

The American Editor has thoroughly revised the text, corrected inaccuracies, and adapted the citation of authorities to American editions. He has also "added additional references to the American standard treatises on Anatomy and Physiology."

83. COOPER, THOMAS.—*Traacts on Medical Jurisprudence, including FARR's Elements of Medical Jurisprudence, DEASE's Remarks on Medical Jurisprudence, MALE's Epitome of Juridical or Forensic Medicine, and HASLAM's Treatise on Insanity.* With a Preface, Notes, and a Digest of the Laws relating to Insanity and Nuisance. By THOMAS COOPER, Esq., M. D., Professor of Chemistry and Mineralogy in the University of Pennsylvania, and heretofore President Judge of the Fourth Judiciary District of Pennsylvania. To which is added an Appendix, containing Erskine's speech for James Hadfield, indicted for shooting at the king. An abstract of the report of the trial of Abraham Kessler, indicted for poisoning his wife with white arsenic and laudanum, and a Memoir on the Chromat of Potash, as a test for detecting arsenic, copper, and corrosive sublimate. By THOMAS COOPER, Esq. *Read before the American Philosophical Society, September 18th, 1818.*—8vo. pp. 456. Philadelphia, 1819.

The long title sufficiently indicates the nature of the work. It is mainly a reprint of the Medico-legal tracts mentioned;—the additions of Judge COOPER being neither numerous nor highly important.

84. RYAN, MICHAEL.—*A Manual of Medical Jurisprudence, compiled from the best Medical and Legal works: being an Analysis of a Course of Lectures on Forensic Medicine, annually delivered in London.* By MICHAEL RYAN, M. D., Member of the Royal College of Physicians in London, Member of the Councils of the London Medical, and Medico-Botanical Societies, Lecturer on the Practice of Medicine, Obstetrics, and Medical Jurisprudence. First American edition, with notes and additions. By R. EGLESFELD GRIFFITH, M. D., Lecturer on Materia Medica and Medi-

cal Jurisprudence in the Philadelphia School of Medicine. 8vo. pp. 327. Philadelphia, 1832.

This work is more comprehensive in its objects than Dr. BECK's, though necessarily more brief, and, therefore, less satisfactory on those topics on which they mutually treat. Before investigating the practical subjects of Forensic medicine, it examines various points belonging more especially to the state medicine (Staatsarzneikunde) of the Germans;—for example—"Of the confidence reposed in Medical Men, and the Duties they owe Society;"—"Of Medical Ethics, or Precepts of Professional Conduct."—"Ethics of the Present Period;"—"Of Professional Conduct relative to Hospital and other Medical Charities, and in Private Practice," &c.

In the American edition, Dr. GRIFFITH has omitted such parts as refer merely to the local laws of England. One of the chapters has been entirely re-written, to accommodate it to the laws of the several States; and the same has been done with the chapter on Legal Evidence, on which Dr. RYAN was very brief.

### 3. Not Reprinted.

85. PARIS, J. & FONBLANQUE, J. S. M.—*Medical Jurisprudence*. By J. A. PARIS, M. D., F. R. S., F. L. S., Fellow of the Royal College of Physicians; and J. S. M. FONBLANQUE, Esq., Barrister at Law. "Hæc est illa amica Imperantium atque Medentium conspiratio, qua effectum est, ut aliquo veluti connubio Medicina ac Jurisprudentia inter se jungerentur." Hebenstreit Anthropolog: Forens. In three volumes, 8vo. pp. 440, 318. London, 1823.

The definition given by Dr. PARIS and M. FONBLANQUE, of 'Medical Jurisprudence,' exhibits the topics embraced in the work before us. "A science by which medicine, and its collateral branches, are made subservient to the construction, elucidation, and administration of the laws, and to the preservation of the public health." It embraces, consequently, *Forensic Medicine* and *Medical Police*. The work is divided into three parts. I. Of the College of Physicians—College of Surgeons—Society of Apothecaries—Medical Liabilities and Exemptions—Public Health—Quarantine Laws and Medical Police. II. Medical Evidence—Marriage and Divorce—Legitimacy—Monsters—Hermaphrodites—Insanity—Nuisances—Life Insurance and Survivorship. III. Spontaneous Combustion—Rape—Real and Apparent Death—Sudden Death—Asphyxia—Suicide—Poisons—Abortion and Infanticide.

The Appendix contains numerous interesting cases, laws, &c.

## XI. OBSTETRICS.

1. *American.*

86. BARD, SAMUEL.—*A Compendium of the Theory and Practice of Midwifery; containing Practical Instructions for the Management of Women during Pregnancy, in Labor, and in Child-bed.* Illustrated by many cases, and particularly adapted to the use of students. 5th edition—enlarged. By SAMUEL BARD, M. D., L. L. D., President of the College of Physicians and Surgeons in the University of the state of New York. 8vo. 419. New York, 1819.

Almost *passé*. It was at one time much used—in the New York schools especially—as the fact of its being in its fifth edition sufficiently exhibits. It contains numerous woodcuts; many of them very poorly executed.

87. DEWEES, W. P.—*A Compendious System of Midwifery, chiefly designed to facilitate the Inquiries of those who may be Pursuing this branch of Study. Illustrated by Occasional Cases. With many Engravings.* 8th edition, with additions and additional plates. By WILLIAM P. DEWEES, M. D., formerly Professor of Midwifery in the University of Pennsylvania, Member of the American Philosophical Society, Member of the Philadelphia Medical Society, &c. Philadelphia, 1837.

The author is mainly indebted to this work for his extensive reputation as a practical self-reflecting obstetrician. It contains much important matter.

2. *Reprinted in this Country.*

88. BAUDELLOCQUE.—*An Abridgment of Mr. Heath's Translation of Baudelocque's Midwifery.* With Notes. By WILLIAM P. DEWEES, M. D., Lecturer on Midwifery in Philadelphia; Member of the Philadelphia Medical Society; Member of the Academy of Medicine; Member of the American Philo-



sophical Society, &c. Third edition, with additions. Illustrated by Engravings. 8vo. pp. 590. Philadelphia, 1823.

This work has been wholly superseded by Dr. DEWEES's own on the same subject. The plates represent, 1. A well formed pelvis. 2. The superior strait of a well formed pelvis. 3. The inferior strait of a well formed pelvis. 4. A deformed pelvis. 5. Do. 6. A vertical section of the pelvis with the pelvimeter of Coutouli, and Baudelocque's calipers. 7. Forceps.

89. BURNS, JOHN.—*The Principles of Midwifery; including the Diseases of Women and Children.*—By JOHN BURNS, M. D., Regius Professor of Surgery in the University of Glasgow, &c. &c. From the 7th London edition, revised and enlarged, with improvements and Notes, by T. C. JAMES, M. D., Professor of Midwifery in the University of Pennsylvania. 8vo. pp. 806.

The work of Burns has been long known and appreciated. It is divided into four books. 1. Of the structure, functions, and diseases of the pelvis and uterine system, in the unimpregnated state, and during gestation. 2. Of parturition. 3. Of the puerperal state. 4. Of the management and diseases of children.

The notes by Dr. JAMES occupy nearly fifty pages, and are pertinent. To the whole is appended a series of twelve engravings, with illustrations, selected from SMELLIE's plates.

90. BLUNDELL, JAMES.—*The Principles and Practice of Obstetrics, as at present Taught.* By JAMES BLUNDELL, M. D., Professor of Obstetrical at Guy's hospital. In five parts:—1. The anatomy of the female system.—2. The physiology of the female system.—3. The signs and diseases of pregnancy.—4. The art of delivery.—5. The after management of the puerperal state, the diseases of puerperal women, and strictures on the diseases of infants. To which are added Notes and Illustrations, by THOMAS CASTLE, M. D., F. L. S., Member of Trinity College, Cambridge, &c. &c. 8vo. pp. 520. Washington, 1834.

A valuable work, comprising the lectures of an able physiologist and obstetrician. It is illustrated by marginal woodcuts; which, in the American edition, are badly executed, but intelligible.

91. DENMAN, THOMAS.—*An Introduction to the Practice of Mid-*

*wifery*. By the late THOMAS DENMAN, M. D., Licentiate in Midwifery of the College of Physicians, London; and Honorary Member of the Royal Medical Society of Edinburgh. From the sixth London edition, with a biographical sketch of the author. Third American edition; illustrated with numerous Engravings; with Notes and emendations, by John W. Francis, M. D., Professor of Obstetrics and Forensic Medicine in Rutgers' Medical Faculty, Geneva College, New York; Member of the Medical and Chirurgical Society of London; of the Wernerian Natural History Society of Edinburgh; of the Academy of Natural Sciences of Philadelphia; of the Lyceum of Natural History of New York; of the Literary and Philosophical Society of New York, &c. 8vo. pp. 776. New York, 1829.

The character of Dr. DENMAN'S *Midwifery* is well known. To the American edition, Dr. FRANCIS has added much useful matter. At his suggestion, the "aphorisms on the application and use of the forceps and vectis; on preternatural labours; on labours attended with hemorrhage, and with convulsions"—of the respected author—have been appended to the present edition.

The engravings are seventeen in number. 1. A front view of the bones of a well formed pelvis. 2. The uterus in the 8th or 9th month of pregnancy. 3. A front view of twins in utero in the beginning of labour; the anterior parts being removed. 4. Front view of the gravid uterus, the membranes being unbroken. 5. The gravid uterus—in a lateral view and longitudinal division of the parts—when labour is somewhat advanced. 6. Natural position of the head when in the middle of the pelvis. 7. The face in the hollow of the sacrum; vertex presenting. 8. Forceps applied in a natural presentation. 9. Do. the head pressing on the perineum. 10. Vertex in the hollow of the sacrum. 11. Face presentation. 12. Forehead presenting at the brim. 13. Face presenting, chin to the sacrum. 14. Breech presentation. 15. Extraordinary tumours on the external surface of the uterus. 16. Do. 17. Illustration of a diseased ovarium.

92. GOOCH, ROBERT.—*A Practieal Compendium of Midwifery; being the Course of Lectures on Midwifery, and on the Diseases of Women and Infants, delivered at Saint Bartholomew's Hospital*. By the late ROBERT GOOCH, M. D. Prepared for publication by GEORGE SKINNER, Member of

the Royal College of Surgeons, London. 8vo. pp. 319. Philadelphia, 1832.

A useful compendium by a learned and lamented teacher. It consists of seven lectures. 1. On the natural functions, and on the diseases of the female organs of generation. 2. On pregnancy. 3. On labor. 4. On difficult labor. 5. On the general management of women after delivery, and on the treatment of the common affections incident to the puerperal state. 6. On the diseases of women after delivery. 7. On the general management, on the malformations, and on the diseases of infants.

93. MAYGRIER, J. P.—*Midwifery Illustrated*. By J. P. MAYGRIER, M. D., Professor of Obstetrics and Diseases of Women and Children, at Paris, and Member of several Scientific Societies. Translated from the French, with notes. By A. SIDNEY DOANE, A. M., M. D. With eighty-two plates. Third edition, with additional matter and plates. Imperial 8vo. pp. 179. New York, 1835.

This work is indebted more perhaps to the illustrations than to the text for its translation and publication in this country. The plates are lithographed, and appropriate. In the Appendix are contained the results of the researches of BRESCHET on the human ovum. Two new drawings have been made expressly for the work—one on the distribution of the vessels in the fœtus at the full time, copied from Dr. KNOX's translation of TIEDEMANN on the Arteries; and the other, the position of twins in utero.

The Notes of the American editor are few.

94. MERRIMAN, SAMUEL.—*A Synopsis of the various kinds of difficult Parturition, with Practical Remarks on the management of Labours*. By SAMUEL MERRIMAN, M. D., Teacher of Midwifery, Physician Accoucheur to the Middlesex Hospital, the Westminster General Dispensary, and the Parochial Infirmary of St. George, Hanover Square. With notes and additions. By THOMAS C. JAMES, M. D., Professor of Midwifery in the University of Pennsylvania. "Da spatium tenuemque moram, male cuncta ministrat impetus." Statii Thebaid. Lib. X.

The first American, from the second London edition. 8vo. pp. 297. Philadelphia, 1816.

A useful work, by an experienced practitioner. The same may be

said of the American editor, and the additions he has made. The 'Synopsis' is not, however, much used.

95. RAMSBOTHAM, JOHN.—*Practical Observations on Midwifery, with a selection of cases.* By JOHN RAMSBOTHAM, M. D., Lecturer on Midwifery at the London Hospital, and one of the Physician-Accoucheurs to the Lying-in Charity for delivering poor married women at their own habitations. With Notes. By WM. P. DEWEES, M. D., Lecturer on Midwifery, Member of the American Philosophical Society, Member of the Philadelphia Medical Society, Member of the Academy of Medicine, &c. 8vo. pp. 379. Philadelphia, 1822.

A good practical work, from the pen of a plain observer. It consists of observations on the Uterine Structure, the size of the Gravid Uterus before labour; its shape, situation, and contents—Natural Labour—The Management of the Placenta—The Occurrences after Delivery—Adhesion of the Placenta—Retention of the Placenta—Description of the Placenta—Relaxation of the uterus after Delivery—Collapse after Labour—Protracted Labour and Rupture of the Uterus.

A second volume has been published in England.

96. VELPEAU, A. L. M.—*An Elementary Treatise on Midwifery: or Principles of Tokology and Embryology.* By A. L. M. VELPEAU, M. D., &c. &c. Translated from the French, by CH. D. MEIGS, M. D., Member of the American Philosophical Society, Lecturer on Midwifery and the Diseases of Women and Children, &c. &c. 8vo. pp. 584. Philadelphia, 1831.

A valuable work;—rich in its physiological details. It contains, also, the management of the infant soon after delivery; and of the child-bed woman.

### 3. Not Reprinted.

97. CAMPBELL, W.—*An Introduction to the Study and Practice of Midwifery, and the Diseases of Women and Children.* By WM. CAMPBELL, M. D., late Surgeon, R. N., Fellow of the Royal College of Surgeons, Lecturer on Pathology and Practice of Medicine, and on Midwifery, and the Diseases of Women and Children, Edinburgh; Member of the Medico-Chirurgical Societies of London and Edinburgh, &c. &c. 8vo. pp. 714. London, 1833.

The inducement for the author to publish this volume was the urgent solicitation of his hearers for a text-book. It is divided into four parts. 1. The Anatomy and Physiology of the Organs concerned in Midwifery, and the Consideration of such Points of Legal Medicine as are connected with it. 2. Parturition. 3. Of the Puerperal State. 4. Management and Diseases of Children.

The author is sensible, and, on many points, there is interesting detail, but the work is not a great favourite with the profession.

98. DAVIS, D. D.—*Elements of Operative Midwifery; comprising a description of certain new and improved powers for assisting difficult and dangerous labours; illustrated by plates; with cautionary strictures on the improper use of instruments.* By DAVID D. DAVIS, M. D., Member of the Royal College of Physicians of London and Edinburgh; formerly physician to the Sheffield General Infirmary, late Obstetric Physician to her Royal Highness the Duchess of Kent, one of the Physicians to the Royal Maternity Charity for delivering poor married women at their own habitations, &c. &c., Lecturer on Midwifery. “*Servare modum, finem tueri, naturamque sequi.*” 4to. pp. 345. London, 1825.

This large and expensive volume is divided into five sections, entitled respectively, 1. General and Introductory Remarks on Operative Midwifery. 2. Of the use of Obstetric Instruments. 3. Remarks on the use and special properties of the Long Forceps; with suggestions for certain other modifications of Obstetric Instruments. 4. Of other Expedients for preserving the Lives both of the Mother and her offspring; and 5. Of Obstetric Operations, calculated to insure the preservation of the more important life of the Mother. The plates are twenty in number, and exhibit various obstetrical instruments, with their modes of application.

The author has recently published a more extensive work, entitled “*The Principles and Practice of Obstetrical Medicine,*” &c. With plates. London, 1832, 1836.

99. HAMILTON, JAMES.—*Practical Observations on Various Subjects Relating to Midwifery.* By JAMES HAMILTON, M. D., F. R. S. E., Professor of Medicine and Midwifery, &c. in the University of Edinburgh. Part I. 8vo. pp. 317. Edinburgh, 1836.

Any thing proceeding from Professor Hamilton must be valuable. The contents of this part are 1. On Prolapsus of the Uterus. 2. On Polypous Exerescence of the Uterus. 3. On the Enlargement of the



Ovary. 4. Evidences or Signs of Human Pregnancy. 5. On the Duration of Human Pregnancy. 6. On the Management of the First Stage of Labour. 7. On the Management of the Second Stage of Natural Labour. 8. On the Management of the Third Stage of Labour.

The Appendix contains some observations by Dr. Moir, with the stethoscope, on the action of the fœtal heart.

100. SEVERN, CHARLES.—*First Lines of the Practice of Midwifery; to which are added, Remarks on the Forensic Evidence requisite in cases of fœticide and infanticide.* By CHARLES SEVERN, Surgeon. “Ideoque increpandæ sunt obstetrices, temerariæ et πολυπραγμονες,—quæ moræ debitæ impatientes,—dum accelerare partem capiunt, eundem potius retardant.” *Harveii Exercit.* 8vo. pp. 143. London, 1831.

A brief tract, not entitled to any particular commendation, and, therefore, scarcely known. It contains two plates from MAYGRIER; the one representing “the direction in which the vertex passes through the pelvis, after having made the turn by which the occiput is brought in front;”—the other representing the state of the cervix uteri at the end of the third, sixth, and ninth months of gestation.

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## XII. PATHOLOGY AND THERAPEUTICS.

### 1. American.

101. DEWEES, W. P.—*A Practice of Physic, comprising most of the diseases not treated of in “Diseases of Females,” and “Diseases of Children.”* By WILLIAM P. DEWEES, M.D., Adjunct Professor of Midwifery in the University of Pennsylvania, Member of the American Philosophical Society, Member of the Philadelphia Medical Society, &c. “We live in an age in which the fear of *debility* causes a prodigal use of *stimulants*; and this too often at the expense of the health, and the life of the patient.” *Broussais, Phleg. Chron.* Vol. II. p. 82. “Had I dared to bleed freely, and especially by means of leeches, the patient might have been saved; but I was afraid of debility. But, who is to blame?”

*Ib.* p. 178. In two volumes, 8vo. pp. 833. Philadelphia, 1830.

The author's reputation has procured for this work a somewhat extensive circulation. It is, too, the text-book recommended by the Professor of the Theory and Practice of Physic in the University of Pennsylvania. A glance at the glossary or the prescriptions will exhibit, that it is by no means free from inaccuracies,—a circumstance that detracts greatly from its value as an accompaniment to the young student. Thus, we have, in the glossary—" *Aponeurosses*, the tendinous coverings of the joints." "*Iliac passion*, dry belly-ache." "*Oxygen*, basis of vital air." "*Pathology*, morbid appearance of diseased parts." "*Rickets*, a disease of the bones." "*Scirrhus*, a tumour affecting the glands." "*Subsultus tendinum*, a convulsive motion of the sinews of the wrist." "*Synochus*, a subacute inflammation." "*Tormina*, a griping pain," &c. &c.

102. DUNGLISON, ROBLEY.—*General Therapeutics, or Principles of Medical Practice; with tables of the chief remedial agents and their preparations; and of the different poisons and their antidotes.* By ROBLEY DUNGLISON, M. D. &c. &c. 8vo. pp. 580. Philadelphia, 1836.

The chapters are nine in number, and embrace 1. General Principles. 2. Circumstances that modify the Therapeutical Indications. 3. Of Medicines. 4. Of Excitants. 5. Of Sedatives. 6. Chemical Agents. 7. Mechanical Agents. 8. Deobstruents, Alteratives and Antidotes. 9. Concluding Observations. The chapter on *Excitants* comprises fifteen sections. 1. Excitants Proper. 2. Tonics. 3. Anthelmintics. 4. Astringents. 5. Emetics. 6. Cathartics. 7. Emmenagogues and Abortives. 8. Diaphoretics. 9. Errhines. 10. Sialogogues. 11. Diuretics. 12. Expectorants. 13. Sorbefacients. 14. Revellents. 15. Antispasmodics. The chapter on *Sedatives* comprises four sections. Sedatives Proper, Narcotics, Refrigerants, and Nauseants. That on *Chemical Agents*, four sections. 1. Antacids, 2. Antalkalies. 3. Antilithics. 4. Disinfectants; and that on *Mechanical Agents*, two sections. 1. Demulcents; and 2. Diluents.

After the therapeutical virtues and application of each class of agents have been given, a table of the chief articles is added, which describes the nature of the agents, whence obtained, their forms of preparation, and dose.

The table of poisons, and their antidotes, is arranged for ready reference.

103. EBERLE, JOHN.—*A Treatise on the Practice of Medicine.* By JOHN EBERLE, M. D., Professor of Materia Medica and Botany in the Ohio Medical College, Member of the Ame-

rican Philosophical Society, of the Academy of Natural Sciences of Philadelphia, and Corresponding Member of the Medico-Chirurgical Society of Berlin, in Prussia, &c. &c. In two volumes, 8vo. pp. 579, 579. 3d. edit. Philada. 1835.

The arrangement, adopted by the author, is not very systematic or definite. In his first volume he commences with "Preliminary Observations on the Pathology and Etiology of Fever." He next divides diseases into, 1. "General Irritative Diseases of the Blood-vessels, independent of Local Inflammation;" in which he places fevers, and 2. "General Irritative Diseases of the Blood-vessels, connected with, or dependent on, Local Inflammation;" in which he includes the different phlegmasiæ, internal and external, as well as the hemorrhages, which he defines 'Vascular Irritations, with a flow of Blood.' The arrangement sufficiently indicates the author's views of the pathology of fever.

The second volume considers chronic diseases in the following order. 1. Chronic Nervous Diseases. 2. Chronic Nervous Affections, in which the intellectual and moral faculties are disordered. 3. Local Chronic Nervous Affections. 4. Chronic Affections of the Respiratory Organs. 5. Ditto of the Heart. 6. Ditto of the Alimentary Canal. 7. Ditto of the Urinary Organs. 8. Ditto of the Serous Exhalent Vessels. 9. Ditto of the Lymphatic System. 10. Ditto of the Assimilative Functions: and 11. Ditto of the Sexual Organs. To the whole is added an Appendix on Cholera.

The whole merits commendation, and its extensive circulation proves that such is the general opinion.

- 104.—**EBERLE, JOHN.**—*Notes of Lectures on the Theory and Practice of Medicine, delivered in the Jefferson Medical College, at Philadelphia.* Second edition, corrected. By JOHN EBERLE, M. D. 8vo. pp. 230. Cincinnati, 1834.

These Notes are not only the heads of lectures, but also of the author's 'Practice.' They may be useful to the student during his attendance on lectures, and as a syllabus afterwards. They constitute, indeed, a kind of vade-mecum.

2. *Reprinted in this Country.*

105. **ARMSTRONG, JOHN.**—*Lectures on the Morbid Anatomy, Nature, and Treatment of Acute and Chronic Diseases. Delivered in the Theatre of Anatomy, Webb street.* By the late JOHN ARMSTRONG, M. D., Consulting Physician to the Fever Institution of London, Author of 'Practical Illustrations of Typhus and Scarlet Fever,' &c. Edited by Jo-

SEPH RIX, Member of the Royal College of Surgeons in London. 8vo. pp. 851. London, 1834.

The production of a talented observer. The lectures are fifty-seven in number. The first nine are on the 'Method of investigating Disorder and Disease;' the thirty-two following on 'Acute and Sub-Acute Affections;' and the remainder on 'Chronic Affections.'

This work has been recently reprinted in Dr. Bell's 'Select Medical Library.'

106. BEGIN, L. J.—*The French Practice of Medicine; being a translation of L. J. BEGIN's Treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America.* By XAVIER TESSIER. First edition: two volumes in one; pp. 243, 246. New York, 1829.

This 'French' Practice is the 'Broussais' Practice of Medicine. It is divided into four 'Books.' The *first* treats of the relation existing between therapeutics and other branches of medicine; the *vis medicatrix nature*; the circumstances that contribute to modify indications in the treatment of disease, of remedies, &c. The *second* considers debilitating medications; the *third* direct stimulating medications; and the *fourth* revulsive medications.

The original is a respectable production; but the translation is very imperfectly executed; full of Gallicisms, and often inaccurately rendered.

107. BROUSSAIS, F. J. V.—*Principles of Physiological Medicine, in the form of Propositions; embracing Physiology, Pathology, and Therapeutics, with Commentaries on those relating to Pathology.* By F. J. V. BROUSSAIS, M. D., Knight of the Royal Order of the Legion of Honour, Physician-in-chief and First Professor in the Military Hospital of Instruction of Paris, Member of the Royal Academy of Medicine, of the Royal Medical Society of Madrid, of the Patriotic Society of Cordova, Corresponding Member of the Society of Emulation of Liege, of the Medical Societies of Philadelphia, New Orleans, and Louvain, &c. &c. Translated from the French, by ISAAC HAYS, M. D., and R. EGLESFELD GRIFFITH, M. D., Members of the American Philosophical Society, of the Academy of Natural Sciences,

Honorary Members of the Philadelphia Medical Society, &c. &c. 8vo. pp. 594. Philadelphia, 1832.

The title sufficiently indicates the nature of the work. It is a simple translation of the original, without comments.

108. COSTER, J.—*The Practice of Medicine, according to the Principles of the Physiological Doctrine*. By J. COSTER, M. D. “*Medicamenta stomachum ferè lædunt.*” *Aur. Corn. Cels. lib. II. c. II.* Translated from the French. 8vo. pp. 319. Philadelphia, 1831.

An exposition of the therapeutical views of BROUSSAIS. The order, in which the diseases are treated, is as follows. Irritations and phlegmasiæ of the digestive tube. Phlegmasiæ of the urinary apparatus. Phlegmasiæ of the genital organs. Phlegmasiæ of the mucous membrane of the pectoral viscera and their connections. Acute and chronic cutaneous phlegmasiæ. Hemorrhages, or irritations, with a flow of blood; and white or lymphatic irritations.

109. GOOD, JOHN MASON.—*The Study of Medicine, with a Physiological System of Nosology*. By JOHN MASON GOOD, M. D., F. R. S. Member of the American Philosophical Society, and F. L. S. of Philadelphia. In five volumes. Second American Edition. 8vo. pp. 404, 620, 435, 495, 444. Philadelphia, 1824.

This is one of the reprints of Dr. Good's work, issued prior to the edition of Mr. SAMUEL COOPER. Of late, an edition has been published, in two large volumes, by Dr. SIDNEY A. DOANE, with Notes, by the American Editor, which contains, in addition, the History of Medicine, published by Dr. BOSTOCK, in the ‘Cyclopædia of Practical Medicine.’

The ‘Study of Medicine’ is a useful book of reference, but by no means well adapted as a text-book for the student. Its popularity, indeed, in this respect, is decidedly on the wane. Dr. DOANE's edition does not contain the physiological system of nosology.

110. GREGORY, GEORGE.—*Elements of the Theory and Practice of Physic*. By GEORGE GREGORY, M. D., with notes and additions, adapted to the practice of the United States. By NATHANIEL POTTER, M. D., Professor of the Practice of Physic in the University of Maryland, and S. CALHOUN,



M. D., Professor of Materia Medica in Jefferson Medical College.

“In morbis, sive acutis, sive chronicis, viget occultum quid, per humanas speculationes fere incomprehensibile.”

BAGLIVI. Third American, from the last London edition, with numerous additions and amendments. In two vols. 8vo. Vol. I. pp. 535. Vol. II. pp. 556. Philadelphia, 1831.

Dr. GREGORY's work has been a favorite on both sides of the Atlantic—and justly so. He divides all diseases into *acute* and *chronic*—the consideration of the former being comprised in the first volume, that of the latter in the second. He treats of the classes of acute diseases in the following order.—Fevers, Exanthemata or Eruptive Fevers, Phlegmasiæ or Inflammatory Diseases, and Hemorrhages:—Of the chronic diseases, as follows:—Chronic Diseases of the Encephalon. Chronic Diseases of the Thorax. Chronic Diseases of the Chylopoietic Viscera. Chronic Diseases of the Urinary and Uterine Systems, and Chronic Constitutional Diseases.

An introductory discourse, on the best means of cultivating medicine, and on the climate, modes of living, and diseases of the United States, is from the pen of Professor COLNOUR. The notes and interpolations are numerous.

111. MACKINTOSH, JOHN.—*Principles of Pathology, and Practice of Physic*. By JOHN MACKINTOSH, M. D., Lecturer on the Practice of Physic in Edinburgh, &c. &c. &c. First American, from the third London edition. pp. 744. Washington, 1833.

This is not the only reprint of Dr. MACKINTOSH's work. One has been published, from the last London edition, with notes and additions, by Dr. SAMUEL GEORGE MORTON, of Philadelphia, in two volumes, of which a second edition has just been issued, containing additional matter, by the able American editor.\* The Washington edition is a mere reprint of Dr. MACKINTOSH's work. Dr. MORTON's is adapted more particularly to the practice of medicine in this country, by various additions, and a few alterations.

The original work is, on the whole, good; but the author's views, on many topics, exhibit more of the spirit of a systematist than of a philosopher.

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\* Principles of Pathology and Practice of Physic. By Charles Mackintosh, M. D., Lecturer on the Practice of Physic, in Edinburgh, &c. &c. &c. Second American, from the fourth London edition, with notes and additions. By Samuel

Of the American editions, Dr. MORTON's is decidedly the best, inasmuch as it contains the results of the observation and reflection of a judicious physician, in addition to those of the original author.

112. MARTINET, I.—*Manual of Pathology, containing the Symptoms, Diagnosis, and morbid characters of diseases: together with an exposition of the different methods of examination, applicable to affections of the head, chest, and abdomen.* By L. MARTINET, D. M. P., Resident Physician of the Hotel Dieu. Translated, with notes and additions, by JONAS QUAIN, A. B., Demonstrator of Anatomy at the Medical School, Aldersgate street. Second American edition. 12mo. pp. 275.

A useful little Manual. It is divided into two parts. 1. On the General Method of Examination, applicable to all Diseases; and 2. On Diseases of the Different Parts of the Body. It does not embrace the Therapeutics. It is intended as a clinical guide.

### 3. Not Reprinted.

113. ALISON, W. P.—*Outlines of Pathology.* By WM. PULTNEY ALISON, M. D., F. R. S. E., Fellow of the Royal College of Physicians, and Professor of the Institutes of Medicine in the University of Edinburgh. 8vo. pp. 333. Edinburgh, 1833.

The objects, embraced in this work, are analogous to those in the 'Manual' of MARTINET. It is divided into thirteen chapters. 1. Preliminary Observations. 2. Of the Action of Causes of Sudden Death. 3. Of the Remote Causes of Disease in General. 4. Of Disordered Action of the Heart. 5. Of Local Determinations and Congestions of Blood, and their Immediate Effects. 6. Of Inflammation. 7. Of Idiopathic Fevers. 8. Of Contagious Exanthemata. 9. Of Diseased States of the Secretions. 10. Of Diseased States of Nutrition. 11. Of Diseased States of the Exhalations. 12. Of Diseased States of the Blood. 13. Of Diseased States of the Nervous System.

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George Morton, M. D., Late Physician to the Philadelphia Almshouse Hospital, and Lecturer on Pathological Anatomy. Author of Illustrations of Pulmonary Consumption, &c. &c. In two volumes, 8vo. pp. 563, 538. Philadelphia, 1837.

## XIII. PHYSIOLOGY.

1. *American.*

114. DUNGLISON, ROBLEY.—*Human Physiology; illustrated by Engravings.* By ROBLEY DUNGLISON, M. D., Professor of Materia Medica, Therapeutics, Hygiène and Medical Jurisprudence in the University of Maryland; one of the Physicians to the Baltimore Infirmary; Member of the American Philosophical Society, &c. &c., (now Professor of the Institutes and Medical Jurisprudence in Jefferson Medical College.) “Vastissimi studii primas quasi lineas circumseripsi.” Second edition, with numerous additions and modifications. In two volumes, 8vo. pp. 546 and 566. Philadelphia, 1836.

This work comprises a full investigation of every function, executed by the various organs of the body in health, and is designed to convey accurate impressions regarding all the deeply interesting and mysterious phenomena, that are associated with the life of man—both as an individual and a species.

115. HENDERSON, THOMAS.—*An Epitome of the Physiology, General Anatomy, and Pathology of BICHAT.* By THOMAS HENDERSON, M. D., Professor of the Theory and Practice of Medicine in the Columbian College, Washington City. 8vo. pp. 326. Philadelphia, 1829.

This Epitome is in the form of question and answer.

116. JACKSON, SAMUEL.—*The Principles of Medicine, founded on the Structure and Functions of the Animal Organism.* By SAMUEL JACKSON, M. D., Assistant to the Professor of the Institutes and Practice of Medicine and Clinical Medicine in the University of Pennsylvania; Lecturer on Therapeutics and Materia Medica in the Medical Institute of Philadelphia; Vice-President of the Philadelphia Medical Society; Vice-President of the College of Pharmacy; Member of the American Philosophical Society, &c. “Cum

nil sine ordine et lege fiat, ita vitæ nostræ integritas naturali lege constat." HOFFMAN. 8vo. pp. 630. Philadelphia, 1832.

This work is essentially physiological. It does not, however, consider all the functions;—the *reproductive*, for example, being entirely omitted. It is divided into two parts;—Part I, comprising eight chapters. 1. Of organised bodies. 2. Of the fluids. 3. Vital properties or forces, and organic actions. 4. Of the functions. 5. The intellectual and moral faculties. 6. Function of voluntary movements. 7. Of the expressions. 8. Of sleep and dreams. Part II. includes the organic functions, or functions of nutrition. It is divided into six chapters. 1. Of digestion. 2. Functions of absorption. 3. Function of respiration. 4. Of the function of the circulation, or the distribution and movements of the blood or sanguine nutritive humor. 5. The functions of nutrition and secretion, and calorification. 6. Connections of organs.

The work contains much valuable matter.

117. OLIVER, DANIEL.—*First Lines of Physiology, Designed for the Use of Students of Medicine.* By DANIEL OLIVER, M. D., Professor of the Theory and Practice of Physic, &c. in Dartmouth College. 8vo. pp. 520. Boston, 1835.

A creditable work, not particularly well adapted, however, for the student, for whose use it is avowedly intended; many topics of physiology being omitted, whilst others of but little value have been expatiated upon.

2. *Reprinted in this Country.*

118. BOSTOCK, JOHN.—*An Elementary System of Physiology.* By JOHN BOSTOCK, M. D., F. R. S., L. S., and H. S., M. R. I., Mem. and V. Pres. of the Geological, Mem. and late V. Pres. of the Medical and Chirurgical, and Mem. of the Astronomical Societies of London; Mem. and late Pres. of the Edinburgh Med. Society; Hon. Mem. of the Literary and Philosophical, and of the Historical Societies of New York; Lecturer on Chemistry at Guy's hospital; Professor of Physiology in the Liverpool Royal Institution, &c. &c. In three volumes. 8vo. pp. 416, 510, and 403. Boston, 1825 and 1828.

By no means a superior production. In the *first volume* are con-

tained,—Introductory observations on the history of the science; and six chapters. 1. Of membrane. 2. Of bone. 3. Of muscle. 4. Of the nervous system. 5. Of the circulation. 6. Of the blood. —The *second volume* treats, 7. Of respiration. 8. Of animal temperature. 9. Of secretion. 10. Of digestion. 11. Of absorption; and the *third*, 12. Of generation. 13. Of vision. 14. Of hearing. 15. Of touch, taste and smell. 16. Of the connection of the physical and the intellectual faculties. 17. Of association, habit, &c. 18. Of volition and the passions. 19. Of cranioscopy and physiognomy. 20. Of varieties and temperaments. 21. Of sleep and dreaming. 22. Of the decline and dissolution of the system. The remainder of the volume—no less than seventy-five pages—consists of appendices to the different chapters, index, &c.

119. BLUMENBACH, J. F.—*Elements of Physiology*. See ELLIOTSON.

120. BROUSSAIS, F. J. V.—*A Treatise on Physiology Applied to Pathology*. By F. J. V. BROUSSAIS, M. D., Officer of the Royal Order of the Legion of Honor, Physician-in-chief and First Professor in the Military Hospital of Instruction of Paris, Member of the Royal Academy of Medicine, of the Royal Medical Society of Madrid, and the Patriotic Society of Cordova, Corresponding Member of the Society of Emulation of Liège, of the Medical Societies of Philadelphia, New Orleans, and Louvain, &c. &c. Translated from the French by JOHN BELL, M. D., Lecturer on the Institutes of Medicine and Medical Jurisprudence in the Philadelphia Medical Institute, Senior Prescribing Physician to the Philadelphia Dispensary, &c. &c., and B. LA ROCHE, M. D., Lecturer on the Institutes of Medicine in the Philadelphia School of Medicine, Member of the American Philosophical Society, and of the Academy of Natural Sciences of Philadelphia, Fellow of the Philadelphia College of Physicians, &c. Third American edition, with Notes, and a copious Appendix. 8vo. pp. 666. Philadelphia, 1832.

This is the well known physiological work of the author of the 'Physiological' System of Medicine, containing the main principles of that writer. It is divided into two parts; *Part I*, being subdivided into twelve chapters. 1. Preliminary observations: idea of man. 2. Of the composition of the human body. 3. Of the vital properties of



the tissues; vital power, and vital laws. 4. History of the functions of relation. 5. Examination of the external surfaces of relation, or the external senses. 6. Examination of the encephalon, and of its spinal prolongation. 7. Examination or study of the sensations—instinct—the operations of the intellect. 8. Of laughter, ennui, and sleep. 9. Corollaries on the intellectual operations and the passions. 10. Of the manner in which the exercise of the intellect and the affective movements and the passions, become causes of disease. 11. Of the muscular apparatus of relation, and of its dependencies. 12. A summary of the functions of relation. *Part II*, is divided into fourteen chapters. 1. Of the organic functions in general. 2. Of the nerves destined to the organic functions. 3. Of respiration. 4. Appendix—on the functions of the cerebrum and cerebellum, as tending to throw light on the action of the respiratory muscles. 5. Function of assimilation. 6. On the absorption of the nutritive substances. 7. Of the circulation of the blood. 8. Of the depurations. 9. Of the secretions. 10. Of the internal exhalations. 11. Of general absorption. 12. Of nutrition. 13. Of generation in general. 14. Of the development, consistence, and decay of man—of the various temperaments.

The appendix contains some valuable observations by the translators, including a brief sketch of the divisions of the animal kingdom, and of some of the prominent peculiarities of the different classes;—an inquiry into the functions of the nervous system; the action of the gastric juice on the dead stomach; the phenomena of *endosmose* and *exosmose*. &c. &c. This is, perhaps, the most valuable portion of the book.

121. ELLIOTSON, JOHN.—*Human Physiology*. By JOHN ELLIOTSON, M. D., Cantab. F. R. S., President of the Royal Medical and Chirurgical, and of the Phrenological Societies; Professor of the Principles and Practice of Medicine and of Clinical Medicine, and Dean of the Faculty, in the University; Senior Physician of the North London Hospital, &c. &c., with which is incorporated, much of the elementary part of the *Institutiones Physiologicæ* of J. F. Blumenbach, M. D., F. R. S., Professor in the University of Göttingen. Illustrated with numerous woodcuts. Fifth edition. Part I. 8vo. pp. 302.

This is really the translation—5th edition—as the author styles it, of BLUMENBACH's *Physiology*; now termed 'ELLIOTSON's, because his own matter exceeds that of BLUMENBACH, and because he has remodeled the whole. It is an interesting work—combining the results of the facts and reasonings of two distinguished men of science; and is elucidated with woodcuts from M. Jules Cloquet.

The first part comprises general physiology, and the organic functions. Another part will complete the work.

121. HUTIN, PH.—*Manual of the Physiology of Man; or a concise description of the phenomena of his organization.* By PH. HUTIN.

'Quidquid præcipies, esto brevis, ut cito dicta

Percipiant animi dociles, teneantque fideles."—*Hor. de Art. Poet.*

Translated from the French, with notes. By JOSEPH TOGNO, Student of Medicine. 12mo. pp. 309. Philadelphia, 1828.

Too brief for the wants of the physiological student, and, consequently, almost out of use. M. HUTIN adopts the classification of M. RICHERAND. *First Class.* Functions useful to the life of the Individual. These he divides into two orders. 1. By assimilating to his own substance the aliments on which he feeds. *Functions of Nutrition.* 2. By establishing his relations with the beings which surround him—*Functions of Relation.* *Second Class.* Functions which serve to preserve the species. *Generation.* The Appendix is on Ages, Individuals, Differences, Sympathies, Synergies, Death, Cadaveric Phenomena, and Putrefaction.

122. MAGENDIE, F.—*An Elementary Compendium of Physiology;* for the use of students. By F. MAGENDIE, M. D. Member of the Institute of France, Physician of the Central Chamber of Admission to the Hospitals and Municipal Charities of Paris, Professor of Anatomy, Physiology, and Semeiotics, Member of the Philomathic and Medical Society of Emulation of Paris; of the Medical Societies of Philadelphia, Stockholm, Wilna, the University of Dublin, of the Philosophical Society of London, the Wetteravian Society of Hanau, &c. Translated from the French, with copious notes and illustrations, by E. MILLIGAN, M. D., Licentiate of the Royal College of Physicians, Extraordinary Member of the Royal Medical Society, and Lecturer on Physiology and Therapeutics, Edinburgh. Revised and corrected by a Physician of Philadelphia. With an Appendix. 8vo. pp. 496. Philadelphia, 1824.

This is a translation from the first edition of MAGENDIE's '*Précis.*' Dr. MILLIGAN has published a version of a later edition, but it has not been reprinted in the United States. A translation from the first edi-

tion was likewise published by Dr. Revere, Professor of the Theory and Practice of Physic in Jefferson Medical College, which went into a second edition. Both translations are now nearly out of print.

123. RICHERAND, A.—*Elements of Physiology*. By A. RICHERAND, Professor of the Faculty of Medicine of Paris, Member of the Academies of Vienna, Petersburg, Madrid, Turin, &c. Translated from the French. By G. J. M. DE LYS, M. D. Fifth edition, carefully revised, after the ninth and latest French edition, and supplied with notes, and a copious appendix. By JAMES COPLAND, M. D., Lecturer on Physiology, Principles of Pathology, and the nature and treatment of diseases; Consulting Physician to Queen Charlotte's Lying-in Hospital, Senior Physician to the Royal Infirmary for children, Member of the Royal College of Physicians, London, &c. Second edition. 8vo. pp. 480. New York, 1833.

The author is one of the most fanciful of physiological speculators; yet his work has had the merit of attracting the attention of the profession and the public to the interesting and important subject of physiology, more perhaps than any other. The English editor's notes, which occupy ninety-four pages, are replete with intelligence; and greatly enhance the value of the work.

124. ROGET, P. M.—*Animal and Vegetable Physiology, considered with reference to Natural Theology*. By PETER MARK ROGET, M. D., Secretary to the Royal Society, Fullerian Professor of Physiology in the Royal Institution of Great Britain, Vice President of the Society of Arts, Fellow of the Royal College of Physicians, Consulting Physician to the Queen Charlotte's Lying-in-Hospital, and to the Northern Dispensary, &c. &c. In two volumes, 8vo. pp. 408, 463.

The author of this treatise has been long known as a prosecutor of physiological researches, and as a zealous investigator of physical laws and phenomena. He was, accordingly, well worthy of selection for composing a treatise on comparative physiology. The medical—as well as the general—student is usually but little acquainted with the first principles of natural history. To him the work will be a valuable introduction.

The division, adopted by Dr. Roget, is into four parts. 1. The Mechanical Functions. 2. The Vital Functions. 3. The Sensorial

Functions, and 4. The Re-productive Functions. The number of marginal woodcuts is 463.

To the first volume is prefixed an outline of CUVIER's classification of animals, with examples of animals belonging to each division.

### 3. Not Reprinted.

125. ALISON, W. P.—*Outlines of Physiology*. With an Appendix, containing heads of lectures on Therapeutics. By WILLIAM PULTENEY ALISON, M. D., F. R. S. E., Fellow of the Royal College of Physicians, and Professor of the Institutes of Medicine in the University of Edinburgh. 8vo. pp. 452. Edinburgh, 1831.

A useful little work; the chief fault being its brevity.

126. MAYO, HERBERT.—*Outlines of Human Physiology*. By HERBERT MAYO, F. R. S., Professor of Anatomy and Surgery to the Royal College of Surgeons, Lecturer on Anatomy in the School of Great Windmill Street, Surgeon to the Middlesex Hospital, &c. &c. Second edition, 8vo. pp. 551. London, 1829.

The edition before us is not the last of these useful 'Outlines.' A reprint was announced some time ago in Cincinnati, but it has not appeared. The chapters are seventeen in number. 1. Of Life and Organization. 2. Of Blood. 3. Of Muscular Action. 4. Of the Forces which circulate the Blood. 5. Of the Pulmonary Circulation. 6. Of the Circulation through the Body. 7. Of Digestion. 8. Of the Lacteal and Lymphatic Vessels. 9. Of the Urinary Organs. 10. Of the Skin. 11. Of the Brain and Nerves. 12. Of the Organs of the Senses. 13. Of the Human Voice. 14. Of the Attitudes and Movements of Man. 15. Of Generation. 16. Of Growth and Reparation. 17. Of the Varieties of the Human Species.

There are a few marginal copperplate illustrations.

127. TIEDEMANN, FREDERIC.—*A Systematic Treatise on Comparative Physiology, introductory to the Physiology of Man*. Translated, with notes, from the German of FREDERIC TIEDEMANN, Professor of Anatomy, &c. By JAMES MANBY GULLY, M. D., and J. HUNTER LANE, M. D., F. L. S., &c. Vol. I. London, 1834. 8vo. pp. 431.

A translation of the first volume of TIEDEMANN's *Physiologie des Menschen*,—a work containing a great amount of valuable

matter. It is divided into two Books, comprising, 1. A Comparison between Living Bodies and those devoid of Life; and 2. A Parallel between Animals and Vegetables. In this division is contained the History of the Functions of Nutrition—Of the Disengagement of Imponderable Matters, and of Motion.

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#### XIV. PRACTICE OF PHYSIC.

##### Sec XII. PATHOLOGY and THERAPEUTICS.

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#### XV. SURGERY.

##### 1. *American.*

128. DOANE, SIDNEY A.—*Surgery Illustrated*. Compiled from the works of Cutler, Hind, Velpeau, and Blasius. With fifty two plates. By A. SIDNEY DOANE, A. M., M. D. Royal 8vo. pp. 200. New York, 1836.

The basis of this is the works of Cutler and Gerdy on Bandages, Hind on Fractures of the Bones of the Extremities, Velpeau on Operative Medicine, and Blasius's *Graphie Illustrations of Surgery* (German.)

The plates are fifty-two in number, lithographed, and comprise representations of the most approved instruments and operations of modern surgeons.

Dr. Doane's work cannot fail to be of signal advantage to the student, and a useful accompaniment to the surgeon, in country situations especially.

129. DORSEY, J. S.—*Elements of Surgery, for the use of Students, with Plates*. By JOHN SING DORSEY, M. D., Professor of Anatomy in the University of Pennsylvania, one of the Surgeons to the Pennsylvania Hospital, and the Philadel-



phia Alms House, &c. In two volumes, 8vo. Third edition, with notes. By J. RANDOLPH, M. D.,

————— "for want of timely care

Millions have died of medicable wounds."—ARMSTRONG.

pp. 440, 492. Philadelphia, 1823.

This work of the lamented author was originally intended as a text book for the use of students in the University of Pennsylvania; but it is now superseded by the work of the present Professor of Surgery in that institution. It is illustrated by twenty-eight plates, exhibiting, 1. The interrupted suture. 2. PERCY's bullet forceps. 3. EARLE's bed. 4. Bandages for fractured clavicle. 5. Deformity from the fracture of the condyles of the os humeri. 6. Fractures of the thigh. 7. DESSAULT's apparatus for fractured thigh. 8. PUYSEK's modification of DESSAULT's apparatus. 9. Apparatus for fractured leg. 10. Reduction of a luxated thigh. 11. Trepanning instruments. 12. Carcinoma of the eye. 13. Pterygium, eye instruments, &c. 14. Ditto. Ditto. 15. Cannula for laryngotomy. 16. Hernia, umbilical truss, &c. 17. Strangulated hernia. 18. Bougie. 19. Lancet for dividing strictures of the urethra. 20. The gorget of Dr. PUYSEK. 21. Mode of securing the pudic artery when divided. 22. Guarded bistoury. 23. Inguinal aneurism. 24. Aneurismal varix. 25. Bed for diseased spine. 26. Clubfoot. 27. Tumour on the back. 28. Apparatus for clubfoot.

130. GIBSON, WILLIAM.—*The Institutes and Practice of Surgery, being the outlines of a course of lectures.* By WILLIAM GIBSON, M. D., Professor of Surgery in the University of Pennsylvania, Surgeon and Clinical Lecturer to the Alms House Infirmary, &c.

"Segnius irritant animos demissa per aurem,

Quamquam sunt oculis subjecta fidelibus."—HOR.

Fourth edition, greatly enlarged. In two volumes. 8vo. pp. 468, 409.

The text-book to the author's lectures in the University of Pennsylvania. It is elucidated by numerous well executed copperplate engravings of diseases and apparatus, and is a meritorious production.

2. Reprinted in this Country.

131. ABERNETHY, JOHN.—*Lectures on the Theory and Practice of*

*Surgery.* By JOHN ABERNETHY, F. R. S. &c. 8vo. pp. 190. New York, 1830.

These are the lectures delivered by the celebrated author to his class at Bartholomew's Hospital. They are divided into three sections—Sect. I. "Of the Disturbances of the System in General, which are produced by local affections." This is subdivided into three chapters. General Effects of Local Disease, Injury, or Irritation. Particular Effects of Local Disease, Injury, or Irritation. Disturbances of the Alimentary Organs, and their Influence on the System. Sect. II. "Of Local Diseases, which may occur very generally throughout the body;" embracing Phlegmon, Chronic Inflammation, Irritative Inflammation, Inflammation producing Furuncle, Carbuncle, and Anthrax, Mortification, Oedema, Interstitial, Progressive, and Ulcerative Absorption. Sect. III. "Of Local Diseases, which occur in particular textures throughout the body;" embracing diseases of the absorbent vessels and glands, of local nervous affections, wry neck, neuralgia, of diseases of the skin, of the diseases of bones; of diseases of joints, of diseases induced by extraneous causes, of fractures and their treatment, of injuries to joints, dislocations, and their treatment, of injuries from chemical agency, burns, scalds, and their treatment; and lastly, diseases having poisonous qualities.

132. AVERILL, CHARLES.—*A Short Treatise on Operative Surgery, describing the principal operations as they are practised in England and France; designed for the use of Students in operating on the dead body.* By CHARLES AVERILL, Surgeon, Cheltenham, Fellow of the Royal College of Surgeons, London.

"Elle (chirurgie operative) "sera toujours la partie la plus efficace de l'art de guérir entre les mains des hommes qui la cultiveront avec l'application qu'elle mérite et avec les lumières qu'elle exige." MEMOIRES DE L'ACADEMIE ROYALE DE CHIRURGIE. First American edition, with additions. By JOHN BELL, M. D. Philadelphia, 1823. 12mo.

The work of Averill was regarded as an excellent surgical manual at the time it was published; and it was rendered still more valuable by the additions of the American Editor. In the progressive state of surgery, however, any work published thirteen years ago must necessarily be behind the times.

133. BOURGERY.—*A Treatise on Lesser Surgery; or the Minor Surgical Operations.* By BOURGERY, D. M. P., Author of

"A Complete Treatise on Human Anatomy, comprising Operative Medicine." Translated from the French, with Notes and an Appendix. By WM. B. ROBERTS and JAMES B. KISSAM. Imperial 8vo. pp. 404. New York, 1834.

A useful volume, containing much that is indispensable to be known, and that is passed over in many of the works on operative surgery,—as the adaptation of the bandage, the introduction of the catheter, the dressing of wounds, venesection, &c. &c.

The notes and appendix, by the American translator, comprise much useful and appropriate matter.

131. BURNS, JOHN.—*The Principles of Surgery, volume first, containing the Doctrine and Practice relating to Inflammation and its various consequences, tumours, aneurisms, wounds, and the states connected with them.* By JOHN BURNS, M. D., Regius Professor of Surgery in the University of Glasgow. 8vo. pp. 550. London, 1831.

This is the only volume that has been published. The work has not taken with the profession, and may possibly stop there.

135. COOPER, SIR ASTLEY.—*The Lectures of SIR ASTLEY COOPER, Bart., F. R. S., Surgeon to the King, &c., on the Principles and Practice of Surgery; with additional notes and cases.* By FREDERICK TYRREL, Esq., Surgeon to St. Thomas's Hospital, and to the London Ophthalmic Infirmary. Third American, from the last London edition. 8vo. Three volumes, pp. 260, 383, 393. With six plates.

The work of a veteran teacher and observer. An edition has been published by CAREY & HART, of Philadelphia, in one volume.

136. COOPER, SAMUEL.—*The First Lines of the Practice of Surgery, Designed as an Introduction for Students, and a Concise Book of Reference for Practitioners.* By SAMUEL COOPER, Surgeon to the Forces; Member of the Royal College of Surgeons, and of the Medical and Chirurgical Society of London; Member of the Medical Society of Marseilles; Honorary Fellow of the Academy of Natural Sciences at Catania, &c. &c. With Notes, by ALEXANDER H. STEVENS, M. D., Professor of Surgery in the University of New York; Surgeon to the New York Hospital; Consulting Physician of the New York Dispensary; Mem-

ber of the New York Literary and Philosophical Society; of the Academy of Natural Sciences of Philadelphia; and of the Linnean Society of New England. And additional Notes, by SAMUEL M'CLELLAN, M. D., Professor of Anatomy in Jefferson Medical College, &c. Fourth American, from the fifth London edition, revised and corrected. In two volumes, 8vo. pp. 440, 462. Philadelphia, 1835.

Much used as a text book, wherever the English language is spoken. The author is well versed in the different modern languages of Europe, and has laid their writers under contribution for useful matter. There are eleven copperplate engravings of surgical instruments, &c.

The notes of the American editors are not very numerous, but they are apposite.

137. COOPER, SAMUEL.—*A Dictionary of Praetieal Surgery; Comprehending all the most Interesting Improvements, from the Earliest Times down to the Present Period; an Account of the Instruments and Remedies Employed in Surgery; the Etymology and Signification of the Principal Terms; and Numerous References to Ancient and Modern Works; forming a 'Catalogue Raisonné' of Surgical Literature.* By SAMUEL COOPER, Surgeon to the King's Bench, of the Bloomsbury Dispensary, &c. &c. From the sixth London edition, revised, corrected and enlarged. With numerous Notes and additions, embracing all the principal improvements and greater operations introduced and performed by American Surgeons. By David Meredith Reese, M. D., Licentiate in Surgery and Midwifery; Honorary Member of the Medical and Chirurgical Faculty of Maryland, and of the Medical Society of Maryland, &c. &c. In two volumes, pp. 489 and 510. New York, 1830.

This work has acquired the author great reputation. It is more known and appreciated than his 'First Lines;' but the latter work is perhaps better adapted for a text book. The fact of its being stereotyped in this country is a drawback to it; inasmuch as it cannot easily be modified so as to correspond with the successive English editions. It is an excellent book of reference.

138. HENNEN, JOHN.—*Principles of Military Surgery, Compri-*

*sing Observations on the Arrangement, Police, and Practice of Hospitals, and on the History, Treatment, and Anomalies of Variola and Syphilis. Illustrated with Cases and Dissections.* By JOHN HENNEN, M. D., F. R. S. E., Inspector of Military Hospitals. First American from the Third London edition. With a life of the author, by his son, Dr. JOHN HENNEN. 8vo.

The work of an experienced and accurate observer. It contains—besides introductory remarks on the history, &c., of military surgery—observations on the preparatory steps on taking the field,—general nature and first treatment of wounds—preparation, arrangement, and selection of hospitals,—dressings and general medical treatment—extraction of foreign bodies—contusions and other serious injuries—injuries of the bones—injuries of the joints—contracted extremities—injuries of the blood-vessels—injuries of the nerves—general affections of the system—hospital gangrene, and ordinary mortification—tetanus—amputation—wounds of the head—injuries of the eye, ear, face and neck—wounds of the thorax—wounds of the abdomen—miscellaneous remarks on the examination of recruits, and medical topography—feigned diseases—variola and vaccination and syphilis;—with an appendix, containing the present improved scale of British hospital dietary.

139. *Principles of Surgery.* By JOHN PEARSON, F. R. S., Senior Surgeon of the Lock Hospital and Asylum, Surgeon of the Public Dispensary, and Reader on the Principles and Practice of Surgery. “Rationalem quidem puto *Chirurgiam* esse debere, instrui vero ab evidentibus causis; obscuris omnibus, non a cogitatione artificis, sed ab ipsa arte rejeetis. *Aur. Corn. Celsus in Præfat.* 8vo. pp. 122. In the ‘Library of Practical Medicine,’ published by order of the Massachusetts Medical Society, for the use of its fellows. Vol. II. Boston, 1832.

An excellent work, by an experienced surgeon; adapted to medical library, but inadequate as a guide to the student.

140. SYME, JAMES.—*The Principles of Surgery.* By JAMES SYME, F. R. S., E., Fellow of the Royal College of Surgeons in London and Edinburgh, Surgeon to the Edinburgh Surgical Hospital, and Lecturer on Surgery in Edinburgh. 8vo. pp. 375. Philadelphia, 1832.

A text book to the surgical lectures of the author. The con-



tents are—on inflammation, mortification, effusion, absorption, granulation, suppuration, diseased nutrition, surgery of the blood-vessels; external injuries; amputation; affections of the bones, joints, muscles, and tendons.

141. TAVERNIER, A.—*Elements of Operative Surgery*. Translated from the French of A. TAVERNIER, Doctor of Medicine of the Faculty of Paris, Late Surgeon of the Third Regiment of Marine Artillery, Secretary General of the Athenæum of Medicine of Paris, &c. &c. With copious Notes and additions, by S. D. GROSS, M. D., Corresponding Member of the Athenæum of Medicine of Paris, &c. &c. “Manu strenua, stabili, nec unquam intremiscente.”—CELSUS. 8vo. pp. 448. Philadelphia, 1829.

The work is divided into seven chapters, which treat.—1. Of operations in general. 2. Of the rules concerning common surgical operations. 3. Of the diseases common to the different regions of the body. 4. Of the diseases of particular regions. The introduction contains a history of surgery, which, Dr. Gross remarks, has been taken almost verbatim from the edition of Mr. Cooper's ‘Surgical Dictionary,’ published in 1825.

### 3. Not Reprinted.

142. ALCOCK, THOMAS.—*Lectures on Practical and Medical Surgery, Comprising Observations and Reflections on Surgical Education; on the Investigation of Disease; and on the Ordinary Duties of the Surgeon; forming part of an Extended Course on the Principles and Practice of Surgery, delivered in 1828 and 1829*. Illustrated by Engravings. By THOMAS ALCOCK, Member of the Royal College of Surgeons in London,—of the Medical and Chirurgical Society, of the Medical Society of London, &c. &c.

The author of this work was a skilful surgeon, and excellent man. The lectures contain much useful practical matter, conveyed in an easy intelligent manner.

The plates are executed by Mr. ALCOCK's own hand, and are illustrative of the subjects, for which they were introduced. They are twelve in number, and are on the surgical anatomy of the vessels. The appendix contains.—1. An outline of the general anatomy of the mucous membranes. 2. Regulations proposed for the guidance of students in the performance and explanation of a series of surgical

operations. 3. A series of surgical operations performed—upon the dead subject—and explained by students attending Mr. ALCOCK's lectures, under his immediate superintendence, during the spring of 1829. 4. Prospectus of Mr. ALCOCK's lectures for the season of 1829 and 1830; and lastly, the previous publications of the author.

143. BALLINGALL, SIR GEORGE.—*Outlines of the Course of Lectures on Military Surgery, delivered in the University of Edinburgh.* By SIR GEORGE BALLINGALL, M.D., F.R.S.E., Regius Professor of Military Surgery, Fellow of the Royal College of Surgeons, Surgeon Extraordinary to the King, one of the Surgeons to the Royal Infirmary, Consulting Surgeon to the Edinburgh Surgical Hospital, and Member of the Medico-Chirurgical Societies of Edinburgh, Fife, and Berlin. 8vo. pp. 589. Edinburgh, 1833.

The course is divided into three parts: the *first* embracing numerous topics connected with the formation, discipline, and economy of armies, "and which, although not exclusively of a professional nature, are yet highly important to the health of the soldier;" the *second* embracing those surgical accidents and diseases peculiarly incident to military and naval men, and to which the nature of the profession exposes them in all quarters of the world; and the *third* comprising "the consideration of diseases incident to troops on foreign stations, and of those semblances of disease, which the military or naval surgeon frequently finds it more difficult to combat than the reality."

The outlines contain much important matter, from the observation of a surgeon of eminence.

144. BELL, JOHN.—*The Principles of Surgery, as they relate to wounds, ulcers, fistulæ, aneurisms, wounded arteries, fractures of the limbs, tumours, the operations of trepan and Lithotomy. Also of the duties of the Military and Hospital Surgeon.* By JOHN BELL. A new edition, with commentaries, and a critical inquiry into the practice of Surgery. By CHARLES BELL, Professor of Anatomy and Surgery to the Royal College of Surgeons in London, Surgeon to the Middlesex Hospital, &c. In four volumes. With engravings, and marginal illustrations. 8vo. pp. 535, 620, 432, 480. London, 1826.

A valuable work, written in a most seductive style, and by a distinguished surgeon and teacher. The plates, many of them of morbid affections, are admirably executed, from drawings by the lamented author. The wood cuts or marginal illustrations merit equal com-

mendation. The additions, made to his brother's text, by Sir CHARLES BELL, are worthy of his reputation.

145. HOOPER, ROBERT.—*The Surgeon's Vade Mecum, containing the symptoms, causes, diagnosis, prognosis, and treatment of Surgical diseases, accompanied by engravings, to illustrate the modern and approved methods of operating; also select formulæ of prescriptions, and a glossary of terms.* The third edition, greatly enlarged. 12mo. pp. 395. London, 1824.

A useful little manual for the surgical student, but insufficient to supply the want of the larger treatises. It was originally written by Dr. HOOPER, but the third edition was prepared by the author of these pages.

146. LAWRENCE, WILLIAM.—*Lectures on Surgery, Medical and Operative, as delivered in the Theatre of St. Bartholomew's Hospital.* By WILLIAM LAWRENCE, F. R. S., Late Professor of Anatomy and Surgery to the Royal College of Surgeons in London, Surgeon to St. Bartholomew's Hospital, and Lecturer on Surgery at that Hospital, &c. &c. &c. 12mo. pp. 374. London.

Evidently an imperfect copy of the lectures of this eminent surgeon. The volume is chiefly occupied with his lectures on the nature, classification, &c. of diseases, inflammation and its terminations, the pathology and the treatment of fever, wounds, tetanus, hydrophobia, and specific diseases, scrofula, syphilis, and gonorrhœa.

147. LISTON, ROBERT.—*Elements of Surgery.* By ROBERT LISTON, Fellow of the Royal College of Surgeons in Edinburgh, Surgeon to the Royal Infirmary, Senior Surgeon to the Royal Dispensary for the city and county of Edinburgh, Lecturer on Surgery, &c. &c. In three parts, comprising so many volumes. 8vo. pp. 318, 334, and 409. Edinburgh, 1831, 1832.

Intended as a compendium or guide for such students as resort to Edinburgh to acquire their surgical education. In Scotland, the field was formerly occupied by the systems of LATTA, B. BELL, and ALLAN, "but it being now vacant," Mr. LISTON has endeavoured to supply the deficiency, by reducing the heads of his lectures into the present form.

## XVII. MISCELLANEOUS MEDICAL WORKS.

## MONOGRAPHIC AND POLYGRAPHIC.

148. ABERCROMBIE, JOHN.—*Pathological and Practical Researches on Diseases of the Stomach; the Intestinal Canal, the Liver, and other viscera of the Abdomen.* By JOHN ABERCROMBIE, M. D., Professor of the Royal College of Physicians of Edinburgh, &c., and First Physician to his Majesty in Scotland. 8vo. pp. 416. Philadelphia, 1830.

149. Do. Do.—*Pathological and Practical Researches on Diseases of the Brain, and the Spinal Cord.* By JOHN ABERCROMBIE, M. D., Fellow of the Royal College of Physicians of Edinburgh, &c., and First Physician to his Majesty in Scotland. First American from the second Edinburgh edition, enlarged. 8vo. pp. 464. Philadelphia, 1831.

Two excellent pathological and practical works, from one of the best medical writers and observers of the day. The latter work is in its second American edition, (1836.)

150. Do. Do.—*Inquiries concerning the Intellectual Powers, and the Investigation of Truth.* By JOHN ABERCROMBIE, M. D., F. R. S., Fellow of the Royal College of Physicians in Edinburgh, &c., and First Physician to his Majesty in Scotland. From the second Edinburgh edition. 12mo. pp. 349. New York, 1832.

An admirable psychological work for the medical student as well as the practitioner. It is divided into four parts. 1. Of the Nature and Extent of our Knowledge of Mind. 2. Of the Origin of our Knowledge of Facts relating both to Matter and Mind. 3. Of the Intellectual Operations. 4. Application of the rules of philosophical investigation to Medical Science; and 5. View of the Qualities and Acquirements which constitute a well regulated mind.

151. ANDRAL, G.—*The Clinique Médicale: or Reports of Medical Cases.* By G. ANDRAL, &c. Condensed and translated, with observations, extracted from the writings of the most distinguished medical authors. By D. SPILLAN, M. D. Parts 1, 2, and 3. 8vo. pp. 608. London, 1835.

A well known and highly esteemed clinical work, much of which

has been long before the public in its French form. The first part on "Fevers," was published in 1823.

152. ARNOTT, NEIL.—*Elements of Physics, or Natural Philosophy, General and Medical, explained independently of technical mathematics, and containing new disquisitions and practical suggestions.* In two volumes. By NEIL ARNOTT, M. D., of the Royal College of Physicians. Second American from the fourth London edition, with additions. By ISAAC HAYS, A. M., M. D., &c. 8vo. pp. 552, 232.

A work which ought to be read by every medical student. The first volume only is edited by Dr. HAYS. It is divided into three parts. 1. The Fundamental Truths minutely examined, and used to explain the general constitution of Material Substances, and of the motions going on among them. 2. Doctrines of Solids or Mechanics. 3. Doctrines of Fluids, or Hydrodynamics.

There are two Appendices to the volume—the *first* on Animal Mechanics; the *second* on Animal Hydrostatics and Hydraulics, and embracing the Circulation, Respiration and Voice, Digestion, Urinary Secretion, and Uterine Phenomena.

The second volume comprehends the subjects of light and heat.

153. BATEMAN, THOMAS.—*A Practical Synopsis of Cutaneous Diseases, according to the arrangement of Dr. WILLAN, exhibiting a concise view of the Diagnostic Symptoms, and the Method of Treatment.* By THOMAS BATEMAN, M. D., F. L. S., Physician to the Public Dispensary, and to the Fever Institution. First American from the fourth London edition. Philadelphia, 1818. 8vo. pp. 348.

The author was the coadjutor and successor of WILLAN, in the Classification and description of Cutaneous Diseases.

The works of Cazenave and Schedel,\* Plumbe,† and Rayer,‡ are now perhaps more employed.

154. BECK, JOHN B.—*Researches in Medicine and Medical Juris-*

\* *A Practical Synopsis of Cutaneous Diseases.* By A. CAZENAVE, M. D., and H. E. SCHEDEL, M. D. Translated from the French, by R. E. Griffith, M. D. Philadelphia, 1829.

† *A Practical Treatise on the Diseases of the Skin, arranged with a view to their constitutional causes, and local characters.* By SAMUEL PLUMBE. Third edition. London, 1829.

‡ *Theoretical and Practical Treatise on the Diseases of the Skin.* By P. RAYER, &c. Second edition. London, 1835.



*prudence.* By JOHN B. BECK, M. D., Professor of Materia Medica and Medical Jurisprudence in the College of Physicians and Surgeons of New York, one of the Physicians to the New York Hospital, Corresponding Member of the Royal Academy of Medicine of Paris, Corresponding Member of the Medical Society of London, &c. &c. Second edition. 8vo. pp. 258. New York, 1835.

All the papers in this volume have previously appeared in print. They are.—1. On Infanticide. 2. On Acute Laryngitis. 3. On the non-contagiousness of Yellow Fever. 4. On Onychia Maligna. 5. On Ulceration and Perforation of the Stomach.

The valuable essay on Infanticide is from the 'Elements of Medical Jurisprudence' of Dr. Beck's brother and himself.

155. BELL, SIR CHARLES.—*The Nervous System of the Human Body; embracing the papers delivered to the Royal Society on the Subject of the Nerves.* By CHARLES BELL, F. R. S. 8vo. pp. 230. Washington, 1833.

A reprint from the beautiful English quarto, and a complete anti-thesis to it in every thing that regards the mechanical execution. The plates are nine in number, all inferior, and some execrable.

156. BELL, JOHN.—*On Baths and Mineral Waters.* In two Parts. Part I. A full account of the hygienic and curative powers of *cold, tepid, warm, hot* and *vapour* baths, and of *sea* bathing. Part II. A history of the chemical composition and medicinal properties of the chief mineral springs of the United States and of Europe. By JOHN BELL, M. D., Lecturer on the Institutes of Medicine and Medical Jurisprudence, Member of the Medical and Kappa Lambda Societies, and Fellow of the College of Physicians, Philadelphia, and of the Georgofili Society of Florence, &c. &c. 12mo. pp. 532. Philadelphia, 1831.

The ample title indicates the objects of the work, which are fulfilled in a happy manner. The author is a learned physician, and a practised writer.

157. BELL, THOS.—*The Anatomy, Physiology, and Diseases of the Teeth.*—By THOMAS BELL, F. R. S., F. G. S., Member of the Royal College of Surgeons in London, &c., Lecturer

on the Anatomy and the Diseases of Teeth at Guy's Hospital, and Surgeon Dentist to that Institution. pp. 551. Philadelphia, 1831.

The production of an intelligent gentlemen, who is well versed in the different departments of his profession, and of natural science in general. It is divided into two parts;—the *first* embracing the anatomy and physiology, and the *second*, the diseases &c. of the teeth.

The work is illustrated by eleven plates—of the teeth; the changes prior to, and during, dentition; dental instruments, &c.

158. BRYANT, THOMAS S.—*Examinations in Anatomy and Physiology; being a complete series of questions and answers, designed and intended as preparatory to examinations at the different medical schools throughout the United States, and for those who are about to present themselves before the army and naval boards; to which are annexed tables of the bones, muscles, and arteries.* By THOMAS SYDENHAM BRYANT, M. D., Surgeon United States Army. 12mo. pp. 404. Philadelphia, 1835.

The title sufficiently indicates the nature of the contents.

159. BURNS, ALLAN.—*Observations on the Surgical Anatomy of the Head and Neck; illustrated by cases and engravings.* By ALLAN BURNS, Member of the Royal College of Surgeons, London, and Lecturer on Anatomy and Surgery, Glasgow. First American edition, with a life of the author, and additional cases and observations. By GRANVILLE SHARP PATTISON, Surgeon, Professor of Surgery in the University of Maryland, &c. &c. 8vo. pp. 512. Baltimore.

The work of an excellent surgeon, and on a most interesting part of Surgical Anatomy. The plates are ten in number. 1. Anterior view of arteria innominata. 2. Posterior view of do. 3. Of aortic aneurism. 4. Connections &c. of sub-clavian artery. 5. Tumour between hyoid bone and thyroid cartilage. 6. Distribution of portio dura. 7. Tumour near the parotid duct. 8. Anastomosing aneurism around the orbit, and tumour of lachrymal gland. 9. Openings of nasal sinuses into the nose; and 10. Relations of the rima glottidis.

160. CHASE, HEBER.—*Treatise on the Radical Cure of Hernia, by instruments; embracing an analysis of the mechanical*

*properties of the various trusses now in use, a description of the new instruments invented by the author, and general directions to patients for the safe employment of these instruments, with hints to surgeons in their application, &c.; with numerous illustrations.* By HEBER CHASE, M. D., Honorary Member of the Philadelphia Medical Society, &c. 8vo. pp. 195. Philadelphia, 1836.

The author has evidently thoroughly studied his subject, and his explanations are so perspicuous, that no doubt ought to remain in the mind of the reader regarding the principle or position which he is desirous of enforcing.

The work is well worthy the attention of the surgeon.

161. CHRISTISON, ROBERT.—*A Treatise on Poisons, in relation to Medical Jurisprudence, Physiology, and the Practice of Physic.* By ROBERT CHRISTISON, M. D., Professor of Materia Medica in the University of Edinburgh, Fellow of the Royal College of Physicians, and Royal Society of Edinburgh, Member of the Medico-Chirurgical and Royal Medical Societies of Edinburgh, Honorary Member of the Portsmouth and Portsea Literary and Philosophical Institution, and of the Hunterian Medical Society of Edinburgh, Corresponding Member of the Royal Academy of Medicine of Paris, and the Hufelandian Medico-Chirurgical Society of Berlin. Third edition. 8vo. pp. 876. Edinburgh, 1836.

An invaluable work on every branch of Toxicology, and on every bearing of the subject.

It is divided into two parts. Part I. embracing General Poisoning, and Part II. Individual Poisons.

162. CLARK, JAMES.—*A Treatise on Pulmonary Consumption, comprehending an inquiry into the cause, nature, prevention, and treatment of tuberculous and scrofulous diseases in general.* By JAMES CLARK, M. D., F. R. S., &c. In one volume, 8vo. Philadelphia, 1835.

The basis of this work is the excellent article on 'Tubercular Phthisis,' by the author, in the 'Cyclopædia of Practical Medicine,' edited by Drs. FORBES, TWEEDIE, and CONOLLY;—all practised writers, and of great repute;—the first and the last being now editors of the "British and Foreign Medical Review."

Dr. Clark has been long and favourably known on this side of the Atlantic for his work on *Climates*. The present volume cannot fail to add to his reputation.

163. COMBE, ANDREW.—*The Physiology of Digestion considered with relation to the Principles of Dietetics*. By ANDREW COMBE, M. D., Fellow of the Royal College of Physicians of Edinburgh, and Physician in Ordinary to their Majesties the King and Queen of the Belgians. “Nor is it left arbitrary at the will and pleasure of every man to do as he list; after the dictates of a depraved *humour* and extravagant *phancy*, or live at what rate he pleaseth; but every one is bound to observe the *Injunctions* and *Law of Nature*, upon the penalty of forfeiting their *health*, *strength*, and *liberty*—the true and long enjoyment of themselves.”—*Mainwayringc*. 12mo. pp. 310. New York, 1836.

Intended rather for the public than the profession. The work is divided into two parts. 1. Physiology of Digestion. 2. The Principles of Dietetics viewed in relation to the Laws of Digestion.

It is elucidated by a few marginal wood cuts.

164. COOPER, SIR ASTLEY.—*A Treatise on Dislocations and Fractures of the Joints*. By SIR ASTLEY COOPER, Bart., F. R. S., Sergeant Surgeon to the King, &c. &c. &c. Second American from the sixth London edition. Revised and greatly improved, with the addition of numerous and valuable illustrations. To which are added, the notes or references to the first American edition. By the late JOHN D. GODMAN, M. D., Lecturer on Anatomy and Physiology, Professor of Physiology in the Philadelphia Museum, Member of the Academy of Natural Sciences, &c. &c. 8vo. pp. 516.

A standard work—it need hardly be said—when we regard the source whence it proceeds. It contains thirty-four excellent copper-plate engravings, illustrating the pathological and practical topics discussed in its pages.

165. COPLAND, JAMES.—*A Dictionary of Practical Medicine*: Comprising general pathology, the nature and treatment of diseases, morbid structures, and the disorders especially



incidental to climates, to the sex, and to the different epochs of life; with numerous prescriptions for the medicines recommended, a classification of diseases according to pathological principles, a copious bibliography, with references; and an appendix of approved formulæ: the whole forming a Library of Pathology and Practical Medicine, and a digest of Medical Literature. By JAMES COPLAND, M. D., Consulting Physician to Queen Charlotte's Lying-in Hospital; Senior Physician to the Royal Infirmary for Diseases of Children; Member of the Royal College of Physicians, London; Member of the Medical and Chirurgical Societies of London and Berlin, &c. Parts I. and II. pp. 564. Boston, 1834.

A most valuable work by one of the most learned physicians of the day. Only two parts have as yet been reprinted in this country; the second proceeding as far as the article 'Disease.'

166. DEWEES, W. P.—*A Treatise on the Medical and Moral Treatment of Children.*—By WM. P. DEWEES, M. D., Adjunct Professor of Midwifery in the University of Pennsylvania, Member of the American Philosophical Society, of the Royal Medical Society of Denmark, of the Philadelphia Medical Society, Lecturer on Midwifery, &c. &c. Fifth edition. 8vo. pp. 548. Philadelphia, 1834.

167. Do. Do.—*A Treatise on the Diseases of Females.*—By WM. P. DEWEES, M. D., Professor of Midwifery in the University of Pennsylvania, Member of the American Philosophical Society, of the Royal Medical Society of Denmark, &c. &c. Fifth edition, revised, and corrected. Philadelphia, 1835.

Like all the productions from the same fount, these volumes comprise much solid practical matter.

The 'Treatise on the Diseases of Females' contains several plates—of carcinoma uteri, polypus, fleshy tubercle, hydatids, cauliflower excrescence, ulcerated carcinoma, pessaries, &c.

168. DUCATEL, J. T.—*A Manual of Practical Toxicology: condensed from Dr. Christison's Treatise on Poisons. With Notes and Additions.* By J. T. DUCATEL, M. D., Profes-



essor of Chemistry and Pharmacy in the University of Maryland, Member of the American Philosophical Society, Honorary Member of the Philadelphia College of Pharmacy, a Vice President of the American Academy of Science and Literature, Corresponding Member of the Georgofili of Florence, of the Academy of Natural Sciences of Philadelphia, Columbian Institute of Washington, &c. &c. 12mo. pp. 341. Baltimore, 1833.

In condensing Dr. CHRISTISON'S 'Treatise,' Professor DUCATEL has limited the selection of facts to such as appertain to *practical toxicology* alone. "The notes and additions consist chiefly of explanatory observations on the text, which is to be understood as exclusively compiled from Dr. Christison's Treatise; a tabular view of the class of irritant poisons; references to the chief pharmaceutical and artificial preparations, containing ingredients ranked among poisons; fuller accounts of the mode of treatment for several poisons, principally as regards the chemical treatment by antidotes; descriptions of the botanical characters of the poisonous families of plants, of which the most common genera and species are mentioned, and those indigenous to America inserted, and their properties specified; and some additional facts concerning the singularly corrosive effects of chronic acid, and the poisonous properties of its salts."

The 'Manual' must be extremely useful both to the practitioner and student.

169. DUPARCQUE, F.—*A Treatise on the Functional and Organic Diseases of the Uterus*. From the French of F. DUPARCQUE, Docteur en Médecine de la Faculté, et ancien interne des Hospitaux et Hospices civils de Paris, &c. &c. Translated, with notes. By JOSEPH WARRINGTON, M. D., of Philadelphia. 8vo. pp. 455. Philadelphia, 1837.

A work containing much valuable practical information on a class of most interesting diseases. It is divided into two parts. Of these, Part I. consists of three chapters. 1. On the Origin and Causes of Organic Affections of the Uterus. 2. Their Mode of Formation, Developments, and Termination; and 3. The Means of Exploration for recognising Uterine Diseases. Part II.—which treats of the particular organic alterations of the uterus—embraces four chapters. 1. Of Engorgements of the Uterus of Various Kinds. 2. Of Alterations of the Uterus. 3. Of Confirmed Cancers of the Uterus; and 4. Of the Surgical Treatment of Engorgements and Ulcerations of the Uterus.

Dr. WARRINGTON has done well to favor the profession with an English version of this work.

170. EBERLE, JOHN.—*A Treatise on the Diseases and Physical Education of Children.* By JOHN EBERLE, M. D., Professor of the Theory and Practice of Medicine in the Medical College of Ohio, Member of the American Philosophical Society, of the Academy of Sciences of Philadelphia, Corresponding Member of the Medico-Chirurgical Society of Berlin, in Prussia, &c. &c. 8vo. pp. 559. Cincinnati, 1833.

Like every thing, that emanates from the author, this work contains much good sense. It is divided into two 'Books.' 1. Of the Prophylactic and Physical Management; and 2. Of the Diseases of Children.

171. GERHARD, W. W.—*On the Diagnosis of Diseases of the Chest: based upon the comparison of their physical and general signs.* By W. W. GERHARD, M. D., Physician of the Blockley Hospital, Lecturer in the Philadelphia Medical Association, Fellow of the Philadelphia College of Physicians, Member of the Société Médicale and Observation, and of the Société Anatomique of Paris. 8vo. pp. 183. Philadelphia, 1836.

A useful guide to the investigator of thoracic diseases by the physical evidences.

The author is an intelligent pupil of Louis, and a zealous inquirer into pathological phenomena. For the facts, he expresses himself chiefly indebted to LAENNEC, LOUIS, and ANDRAL.

172. GODDARD, PAUL B.—*Plates of the Cerebro-spinal nerves, with references, for the use of medical students.* By PAUL B. GODDARD, M. D., Prosector of Anatomy in the University of Pennsylvania, Member of the Academy of Natural Sciences, of the Philadelphia Medical Society, &c. 4to. pp. 60.

The plates are twelve in number, lithographed, and well executed. Plate 1 represents the point of emergence of twelve pairs of nerves from the base of the brain. 2. The distribution of the first pair, or olfactory, and of some branches of the fifth pair. 3. The course of the second, third, fourth, first branch of fifth, and sixth pairs. 4. The distribution of the second and third branches of the eighth. 5. Of the seventh pair (facial and auditory.) 6. Chiefly, the pneumogastric nerves. 7. The glosso-pharyngeal and hypoglossal. 8. The origin of thirty-one pairs of spinal nerves, and the structure of the medulla. 9. The nerves of the shoulder and arm, as far as the elbow. 10. The continuation of the nerves of the arm to the forearm and hand. 11. The nervous trunks, which arise from the lumbar plexus, and supply

the anterior part of the lower extremity as far as the knee; and 12. The nerves which arise from the sciatic plexus, &c.

They must prove a valuable accompaniment to the student in the acquisition of neurology.

173. GOOCH, ROBERT.—*An Account of some of the most Important Diseases Peculiar to Women*.—By ROBERT GOOCH, M. D. 8vo. pp. 326. Philadelphia, 1836.

The work of a most excellent and talented observer. It treats—  
1. Of the peritoneal fevers of lying-in women. 2. The disorders of the mind in lying-in women, with thoughts of insanity as an object of moral science. 3. The mode of distinguishing pregnancy from the diseases which resemble it. 4. Polypus of the uterus. 5. Irritable uterus. 6. A peculiar form of hemorrhage from the uterus. 7. Of some symptoms in children erroneously attributed to congestion of the brain.

174. HALL, MARSHALL.—*A Critical and Experimental Essay on the Circulation of the Blood; Especially as Observed in the Minute and Capillary Vessels of the Batrachia and of Fishes*. By MARSHALL HALL, M. D., F. R. S. E., M. R. I., M. Z. S. &c. &c. Philadelphia, 1835. 8vo. pp. 168.

*Researches Principally Relative to the Morbid and Curative Effects of Loss of Blood*. By MARSHALL HALL, M. D., F. R. S. E., M. R. I., M. Z. S. &c. &c. 2d American edition. 8vo. pp. 254.

These two volumes have been incorporated, by Messrs. Carey and Hart, of Philadelphia, into one.

The *first* portion, or volume, contains ten plates, illustrative of the circulation in animals—in the web of the frog's foot, in the intestines; in the lung of the salamander and frog, &c. &c.

The *second* portion consists of 'researches,' which have attracted the attention of practitioners more forcibly to the evils attendant upon too copious an abstraction of the vital fluid in particular cases.

175. Do. Do.—*The Principles of Diagnosis*. By MARSHALL HALL, M. D., F. R. S., L. and E., &c. Second edition, entirely re-written. 8vo. pp. 463. New York, 1834.

The work is divided into two parts. 1. The sources of diagnosis. 2. The practice of diagnosis.

The *first* part embraces four sections. 1. The history of diseases. 2. The symptoms of diseases. 3. The effects of remedies; and 4. The morbid anatomy. The *second* part comprises three sections. 1. The diagnosis of the diseases of systems. 2. The diagnosis of the diseases of organs. 3. The diagnosis of some topical diseases.

The author's qualifications as a writer are well known. The present volume—although faulty in some respects—contains much useful matter.

176. Do. Do.—*Lectures on the Nervous System and its Diseases.* By MARSHALL HALL, M. D., F. R. S., L. and E., Lecturer on the Theory and Practice of Medicine, &c. &c. 8vo. pp. 240. Philadelphia, 1836.

These lectures are on the anatomy, physiology, pathology, and therapeutics of the nervous system. The author has views of his own on some of these subjects. He divides the nervous system into 1. The *cerebral*, or the *sentient* and *voluntary*. 2. The *true spinal*, or the *excito-motory*. 3. The *ganglionic*, or the *nutrient*, the *secretory*, &c.

177. HARLAN, RICHARD.—*Medical and Physical Researches; or Original Memoirs in Medicine, Surgery, Physiology, Geology, Zoology, and Comparative Anatomy. Illustrated with Plates, containing 160 Figures.*—By R. HARLAN, M. D., F. L. S., Lond., Corresponding Member of the Royal Museum of Natural History of Paris; of the Royal Academy of Medicine of Sweden; of the Wernerian Natural History Society of Edinburgh; of the Geological Society of France; of the Boston Natural History Society; Honorary Member of the Asiatic Society of Bengal; of the Medical Society of Kent, England; of the New Hampshire State Medical Society; Member of the New York Lyceum of Natural History; of the American Philosophical Society; of the Academy of Natural Sciences of Philadelphia; Surgeon to the Philadelphia Almshouse Hospital; Professor of Comparative Anatomy, &c. "Whilst professional knowledge should undoubtedly be the first object of the physician's studies, general science should not be neglected, and is so far from being incompatible with that primary object, that it cannot fail to enlarge your views and give efficiency to your professional researches. So intimate



is the connection between every object of useful and scientific inquiry, that there is hardly one branch of knowledge, which does not in some measure throw light and illustration upon others." *Sir A. Cooper, Lect. on Surgery*.—Large 8vo. pp. 653. Philadelphia, 1835.

A volume that contains matter interesting to the physician and the naturalist; most of which had, however, been previously presented to the scientific world in some form.

The introduction comprises some appropriate remarks on the affiliation of the natural sciences.

The chief medical contributions are—an inquiry into the functions of the brain in man and in the lower order of animals—report of the Academy of Medicine, of Philadelphia, on absorption—experiments with the poison of the rattlesnake—on the generation of animal heat—on variety of complexion and natural peculiarity of features, &c.

The work is uncommonly well got up.

178. HAYS, ISAAC.—LIBRARY OF THE MEDICAL SCIENCES. *The American Cyclopaedia of Practical Medicine and Surgery; a Digest of Medical Literature*. Edited by ISAAC HAYS, M. D., Surgeon to Wills' Hospital; Physician to the Philadelphia Orphan Asylum; Member of the American Philosophical Society, &c. &c. &c. Vol. I. pp. 560. Philadelphia, 1834. Vol. II. pp. 589. Philadelphia, 1836.

Two volumes only of this useful work have appeared. The contributors—in alphabetical order—are as follows:—Dr. FRANKLIN BACHE, (almost all the chemical articles.) Dr. CHAPMAN, (*Angina Pectoris*, and *Asthma*.) Dr. REYNELL COATES, (many of the surgical articles—as *Abdomen* [Surgical Pathology], *Adhesion*, *Ankle*, *Anthrax*, *Anus*, and *Arm*, (fracture.) Dr. D. F. CONDIE, (*Ages*, *Amnesia*, *Anasarca*, *Angina*, *Apoplexy* and *Ascites*.) Dr. DEWEES, (*Abortion*, *After-pains*, *Amenorrhœa* and *Aphthæ*.) Dr. DUNGLISON, (*Asphyxia*, *Atmosphere*.) Dr. EMEASON, (*Achor*, *Aene*, *Affusion* and *Alopecia*.) Dr. GEDDINGS, (*Abdomen*, [Anat.] *Acephalus*, *Adipose Tissue*, *Amputation*, *Aorta*, *Arm*, *Arteries*, *Atrophy*, *Azilla*, &c.) Dr. R. E. GRIFFITH, (*Abortion*, [Med. Leg.] *Absorbents*, *Ages*, [Med. Leg.] and various articles of the *materia medica*.) Dr. THOMAS HARRIS, (*Abscess*.) Dr. HODGE, (*Aneurism*.) Dr. HORNER, (*Ambulance*, *Anchylosis*.) Dr. JACKSON, (*Absorption*, *Alteratives*, *Anemia*, *Antiphlogistic* and *Arsenic* [Therap.] ) Dr. J. K. MITCHELL, (*Arsenic* [Chem. and Med. Leg.] ) Dr. R. M. PATTERSON, (*Atmosphere* [Phys. Hist.] ) Dr. J. C. WARREN, (*Air*, when received into the veins.) Dr. GEORGE B. WOOD, (numerous articles of the *materia medica*.)



Dr. ISAAC HAYS, (*Abdomen*, [Physiology, Symptomatology, and Pathology;] *Abstinence*, *Amaurosis*, *Anchylops*, *Anchyloblepharon*, *Anus*, [artificial, and imperforate;] *Arsenic*, [Pharm. and Posol;] *Asthma* of Millar, &c. &c.)

For the credit of the profession, it is to be hoped, that a work, which has met with so much favor, both at home and abroad, will not be permitted to languish.

179. Do. Do.—*Select Medico-Chirurgical Transactions; a Collection of the Most Valuable Memoirs Read to the Medico-Chirurgical Societies of London and Edinburgh; the Association of Fellows and Licentiates of the King and Queen's College of Physicians in Ireland; the Royal Academy of Medicine of Paris; the Royal Societies of London and Edinburgh; the Royal Academy of Turin; the Medical and the Anatomical Societies of Paris, &c. &c.* Edited by ISAAC HAYS, M. D. 8vo. pp. 420. Philadelphia, 1831.

The title indicates what the editor desired to do, rather than what he has done. He states in his preface, that the number of memoirs in our own language, which urged themselves upon his attention by their merits, was so great, as to induce him to make up the volume entirely of these materials.

The papers consist,—of observations on the nature and treatment of erysipelas, by Mr. Lawrence; on the treatment of erysipelas by punctures; by Dr. R. Dobson; case of erysipelas by Mr. Copland Hutchinson; on painful subcutaneous tubercle, by Mr. William Wood; auscultation the only evidence of pregnancy, by Dr. John C. Ferguson; on the same subject, by Dr. Ivory Kennedy; chemical physiology of the blood and respiration, Dr. Robert Christison; experiments relative to the carbonic acid of expired air, by Dr. J. Arjoux; on the tendency to calculous diseases, and on urinary concretions, by Dr. J. Yelloly; on the infrequency of calculi among the seafaring, by Mr. C. Hutchinson—and a farther inquiry into this subject; clinical cases in the medical wards of the Meath hospital, by Dr. R. J. Graves, and Dr. William Stokes; on the peripneumonia of children, by Dr. Thomas Cuming; and on spasm of the glottis, by Dr. H. Marsh.

These papers are of undoubted value.

180. HOPKINSON, J. P.—*Engravings of the Arteries.* By J. P. Hopkinson, M. D., Demonstrator of Anatomy in the University of Pennsylvania, &c. &c. Royal 8vo. pp. 15. Philadelphia, 1833.

The plates are nine in number, 1. Of the external carotid. 2.

internal maxillary. 3. Subclavian and axillary. 4. Arteries of the arm and hand. 5. Aorta. 6. External and internal iliaes. 7. Femoral and tibial. 8. Fœtal circulation. 9. Cœliac artery.

They are lithographed and small, but distinct.

181. LAENNEC, R. T. H.—*A Treatise on Diseases of the Chest, and on Mediate Auscultation*. By R. T. H. LAENNEC, M. D., Regius Professor of Medicine in the College of France, Clinical Professor to the Faculty of Medicine of Paris, &c. &c. Translated from the latest French edition, with copious Notes, and a sketch of the author's life, by JOHN FORBES, M. D., F. R. S., Member of the Royal College of Physicians, Physician to the Chichester Infirmary, and Physician in Ordinary to his Royal Highness the Duke of Cambridge. From the 4th London edition, considerably enlarged and improved, with many additional Notes, and an extensive bibliography of the different diseases. With Plates. Philadelphia, 1835.

The great work of the illustrious originator of auscultation as a means of diagnosis in chest diseases; clothed in an English garb by one of the most gifted of English physicians—himself a practised explorer of thoracic affections.

The plates exhibit various modifications of the stethoscope, the pleximeter of Piorry, &c.

182. LAWRENCE, W.—*A Treatise on the Diseases of the Eye*. By W. LAWRENCE, F. R. S., Surgeon to St. Bartholomew's Hospital, and Lecturer on Surgery at that Hospital; Surgeon to Bethlehem and Bridewell Hospitals, and late Surgeon to the London Ophthalmic Infirmary. 8vo. pp. 582. Washington, 1834.

The basis of this work is the lectures on the anatomy, physiology, and diseases of the eye, delivered by the author at the London ophthalmic infirmary. It contains a great amount of valuable matter, from a first rate physiologist and surgeon.

183. LITTELL, S. JUNR.—*A Manual of the Diseases of the Eye*. By S. LITTELL, JR., M. D., one of the Surgeons of the Wills' Hospital for the Blind and Lame, Fellow of the Col-

lege of Physicians of Philadelphia, &c. &c. 12mo. pp. 255. Philadelphia, 1837.

Two hundred and twenty pages are devoted to the diseases of the eye. The remainder of the work is occupied by a list of formulæ; and a vocabulary of terms. It considers—1. Diseases of the orbit. 2. Wounds of the eye and its appendages. 3. Diseases of the lachrymal organs. 4. Diseases of the palpebræ; and 5. Diseases of the conjunctiva. It is a good 'Manual.'

181. LOBSTEIN, J. F.—*A Treatise on the Structure, Functions, and Diseases of the Human Sympathetic Nerve*. Illustrated with Plates. By JOHN FREDERIC LOBSTEIN, Professor of Clinical Medicine, and Pathological Anatomy, in the Medical Faculty of Strasburg, First Obstetric Physician to the City Hospital, and Member of many Learned Societies. Translated from the Latin, with Notes, by JOSEPH PANCOAST, M. D. 8vo. pp. 157. Philadelphia, 1831.

The name of Lobstein is well known to the student of physiology and pathological anatomy; and the work before us is not the least of his productions. The plates are six in number, and represent the vessels of the ganglia; the right semilunar ganglion; an inflamed semilunar ganglion; the solar plexus; the carotid artery, with branches of the sympathetic, &c. &c.

Dr. PANCOAST has rendered the anatomical student a farther service, by republishing the plates of MANEC of the cerebro-spinal, and of the ganglionic system of nerves, with translations of the explanations.

185. LOUIS, P. CH. A.—*Anatomical, Pathological, and Therapeutic Researches upon the Diseases known under the name of Gastro-Enteric, Putrid, Adynamic, Ataxic or Typhoid Fever, &c. Compared with the most Common Acute Diseases*. By P. CH. A. LOUIS, &c. &c. Translated by HENRY J. BOWDITCH. 8vo. Two volumes. Boston, 1836.

186. Do. Do.—*Pathological Researches on Phthisis*. By P. CH. A. LOUIS, Doctor in Medicine of the Faculties of Paris and St. Petersburg; Physician to the Hospital of La Pitié; President for Life of the Society for Medical Obser-

vation, &c. Translated from the French, with Introduction, Notes, Additions, and an Essay on Treatment, by CHARLES COWAN, M. D. E., M. D. P., M. R. C. S. E. Member of the Society for Medical Observation; Bachelier en Lettres of the Sorbonne; Elève of the Hospitals of Paris and of the Ecole Pratique; Ex-president of the Hunterian Society, and Member of the Royal Medical and Ethical Societies of Edinburgh. Revised and altered, by HENRY J. BOWDITCH, M. D., Fellow of the Massachusetts Medical Society, and Member of the Society for Medical Observation at Paris. 8vo. pp. 550. Boston, 1836.

187. Do. Do.—*Researches on the Effects of Blood-Letting in some Inflammatory Diseases, and on the Influence of Tartarized Antimony and Vesication in Pneumonia.* By P. CH. A. LOUIS. Translated by C. G. PUTNAM, M. D., with Preface and Appendix, by JAMES JACKSON, M. D., Physician of the Massachusetts General Hospital. 8vo. pp. 171. Boston, 1836.

These volumes contain the results of the observations of one whose clinical practice has had more influence, perhaps, upon the therapeutists of the present day than that of any other individual.

They must be perused by the student free from all bias; and careful observation must prove to him the sources of fallacy—if such there be—in the views of the distinguished author—due attention being paid to the circumstance, that the observations of M. Louis were made in another hemisphere, and therefore require a careful repetition in this.

188. MORTON, SAMUEL GEORGE.—*Illustrations of Pulmonary Consumption; its anatomical characters, causes, symptoms, and treatment; to which are added some remarks on the climate of the United States, the West Indies, &c. With thirteen plates, drawn and coloured from nature.* Second edition. By SAMUEL GEORGE MORTON, M. D., late Physician to the Philadelphia Almshouse Hospital, Member of the Royal Medical Society of Edinburgh, of the Philadelphia Medical Society, of the College of Physicians and Surgeons of the University of New York, of the American



Philosophical Society, of the Academy of Natural Sciences of Philadelphia, &c. &c. &c.

"Misera hære tabes, sæva, atrox et insensibilis, teneros et amabiles depascens, emde et luctu patriam implet."—GREGORY.

"A physician should consider his obligations to his profession and society undischarged, who has not attempted to lessen the number of incurable diseases. This is my apology for attempting to make CONSUMPTION the object of medical inquiry."—RESN.

8vo. Philadelphia, 1837.

A valuable work from a judicious observer, and experienced pathologist. The plates are beautifully executed, lithographed, and drawn from nature. They represent accurately various stages of tuberculous degeneration of the lungs.

189. PARIS, J. A.—*A Treatise on Diet: with a view to establish, on practical grounds, a system of rules for the prevention and cure of the diseases incident to a disordered state of the digestive functions.* By J. A. PARIS, M. D., F. R. S., Fellow of the Royal College of Physicians, &c. &c. "Some physiologists will have it that the stomach is a mill; others, that it is a fermenting vat; others, again, that it is a stew-pan: but, in my view of the matter, it is neither a mill, a fermenting vat, nor a stew-pan—but a *stomach*, gentlemen, a *stomach*."—*Manuscript note from Hunter's Lectures.* 8vo. pp. 210. New York, 1828.

A work which has gone through several editions in England, but which has not met with much favour on this side of the Atlantic. It does not, indeed, merit much. It is divided into three parts. Part 1 comprising an anatomical and physiological view of the digestive organs; Part 2, the *materia alimentaria*; and Part 3, indigestion.

The great fault is, that it is too popular in its cast.

190. PARRISH, JOSEPH.—*Practical Observations on Strangulated Hernia, and some of the diseases of the urinary organs.* By JOSEPH PARRISH, M. D. 8vo. pp. 330. Philadelphia, 1836.

The observations of an excellent and venerable practitioner, anxious to communicate the results of his extensive experience for the benefit of the profession, and—through it—of the public.

The work is divided into two parts. 1. On Strangulated Hernia; and 2. Diseases of the Urinary Organs.

Four plates are added. 1. View of the interior of the lower part of



a bladder, with a diseased prostate gland, to show the effect of an enlargement of the third lobe of that gland. 2. Interior view of the bladder, with enormous development of the third lobe of the prostate gland. 3. Section and interior view of the fundus of a bladder, taken from a subject with enlarged prostate gland, showing the columns of the mucous coat, caused by long continued dysuria, and resembling the muscular columns of the heart; and 4. A canula for guiding a catheter into the bladder, in cases of enlarged prostate gland; and a view of Dr. Parrish's favorite bistoury for the operation of strangulated hernia.

191. SMITH, NATHAN R.—*Surgical Anatomy of the Arteries, with plates and illustrations*. By NATHAN R. SMITH, M. D., Professor of Surgery in the University of Maryland, and one of the Surgeons to the Baltimore Infirmary. Second edition, greatly improved. 4to. Baltimore, 1835.

An excellent work, by one of the most experienced and skilful of American surgeons. It is divided into two parts; the *first* comprising the anatomy, physiology, and pathology of the arteries; the *second*, the special anatomy of the arteries, and their surgical relations.

The lithographic and xylographic illustrations are numerous, and the whole is full of important matter to the young practitioner and student.

192. SMITH, SOUTHWOOD.—*A Treatise on Fever*. By SOUTHWOOD SMITH, M. D., Physician to the London Fever Hospital. 8vo. pp. 448. Philadelphia, 1830.

One of the most clear and satisfactory expositions of an intricate subject of pathology that have issued from the press in any country. The author's situation, as physician to the London Fever Hospital, afforded him admirable facilities for investigation, of which he was not slow to profit.

193. TWEEDIE, ALEXANDER.—*Clinical Illustrations of Fever, comprising a report of the cases treated at the London Fever Hospital, 1828, 1829*. By ALEXANDER TWEEDIE, M. D., Member of the Royal College of Physicians of London, Physician to the Fever Hospital, &c. &c. 8vo. pp. 152. Philadelphia, 1831.

The more immediate object of this work is to give a brief statistical account of fever, as it appeared in London for the ten years previous to its publication; and afterwards to illustrate the pathology of the disease, by giving a clinical report on the cases treated at the Fever Hospital for one year.

195. WILLIAMS, CHARLES B.—*A Rational Exposition of the Physical Signs of the Diseases of the Lungs and Pleura; illustrating their pathology, and facilitating their diagnosis.* By CHARLES J. B. WILLIAMS, M. D. 8vo. pp. 205. Philadelphia, 1830.

Treats of the application of percussion and auscultation in the healthy and diseased conditions of the chest. The plates, which are two in number, explain the construction of the stethoscope, and indicate the different regions of the chest. They are accompanied by a tabular view of those regions, their natural resonance on percussion, &c.

The author's attention has been a good deal directed to the subject; and the volume before us is one of the fruits.

## MEDICAL COLLEGES

### OF THE UNITED STATES.\*

WHEN the continent of America was first visited by emigrants from Great Britain, a few practitioners of medicine doubtless formed part of the body; in the first instance, perhaps, leaving the mother country with the same prospects as their fellow-emigrants, but devoting themselves likewise to the duties of their profession, as occasion required. Of the condition of medicine at this early period of the colonial history we know nothing. It would seem, however, that in New England, for many years after the first settlement of the country, it was deemed indispensable for clergymen to acquire a knowledge of practical medicine; and we find, that, not only did they prescribe for the afflicted, but they entered into medical controversies, and wrote treatises on the diseases of the country.

It was not until a short time before the revolution, that any attempt was made to establish a medical school in the colonies. As early as the year 1638, the College of Harvard was founded at Cambridge, in New England, and, in 1691 and 1700, William and Mary College, in Virginia, and Yale College, in Connecticut, were respectively established. Many of the alumni of these institutions, and of Princeton, New Jersey, founded in 1746, visited Europe to attend the medical lectures, in Edinburgh more especially, and, after having graduated, returned to America to practise their profession. Nearly all the most eminent physicians and surgeons, who commenced practice before the revolution, received their medical education in Europe, and a large portion of them emigrated from Great Britain; for it would appear that it was not until the political bonds between the two countries had been severed, that the conviction was entertained, that the science of medicine could be adequately taught in America.

\* This article is reprinted, with modifications, from one furnished by the author, at the request of Dr. Forbes, to the 'British and Foreign Medical Review,' (No. IV. for October, 1836, p. 583)—one of the very best medical periodicals that have appeared in any country—an 'American Edition' of which is printed in England, on excellent paper, and issued in this country, at the small subscription price of five dollars! Some of the historical details have been derived from a 'Lecture delivered at the opening of the Medical Department of the Columbian College,

In the year 1750, the body of Hermanus Carroll, a criminal, who had been executed for murder, was dissected in the city of New York, by Dr. John Bard and Dr. Peter Middleton, two of the most eminent physicians of the day; and this would seem to have been the first effort made in the United States for the purpose of imparting medical knowledge, by the dissection of the human body, of which there is any record. Some years after this, a course of lectures on anatomy and surgery, accompanied by dissections of the human body, was delivered at Newport, Rhode Island, by Dr. William Hunter, a native of Scotland, and a near relation of William and John Hunter. He was educated at Edinburgh, under the first Monro; went to Rhode Island, about the year 1752, and gave lectures on anatomy, on the history of anatomy, and on comparative anatomy, in the years 1754, 1755, and 1756, to which not only the medical students and physicians, but all the literary gentlemen of the town, were invited.

The following is a list of the various medical schools, according to the date of their formation.

#### 1. UNIVERSITY OF PENNSYLVANIA. (PHILADELPHIA.)

The first conception of a plan for establishing a medical school in America appears to have been formed by Dr. William Shippen, and Dr. John Morgan, both native Americans, while engaged in their studies in Europe. In the year 1762, the former of these gentlemen, in the introductory lecture to a private course of anatomy, announced his belief in the expediency and practicability of founding a medical school in Philadelphia. In 1765, Dr. Morgan, on his return from Europe, laid before the trustees of the College of Philadelphia, which had then been in existence as a collegiate establishment about ten years, a plan for the institution of medical professorships, in connection with the institution under their direction. The plan, strongly recommended by several influential friends of the College in England, was adopted by the trustees, who appointed Dr. Morgan to the chair of the Theory and Practice of Physic. In the same year Dr. Shippen was chosen professor of Anatomy and Surgery; and, for a short period, lectures were delivered by these two professors on the various branches of the science then deemed essential in a course of medical instruction. In 1767, a system of rules was adopted for the organisation of the new school. In 1768, Dr. Adam Kuhn was appointed

in the District of Columbia, March 30th, 1825, by Dr. THOMAS SEWALL; and from the 'American Medical Biography,' of Dr. THACHER, Boston, 1828.



professor of *Materia Medica* and Botany, and Dr. Thomas Bond of Clinical Medicine; and, on the 21st of June, 1768, a medical "commencement" was held, at which the degree of bachelor of medicine was conferred upon ten individuals. In 1769, the chair of Chemistry was added, to which the distinguished Benjamin Rush was appointed.

As the school advanced, additional professorships were created; but it had not been long in action before a rival institution was established and connected with the university; a circumstance that gave rise to much contention, which was finally allayed, in 1791, by a union of the two schools.

The following is the present organisation of the medical department of this university.

The faculty consists of seven professors, independently of Dr. Physick, who holds the station of Emeritus Professor of Surgery and Anatomy, but does not officiate.

1. Nathaniel Chapman, M. D., Professor of the Theory and Practice of Medicine.

2. Robert Hare, M. D., Professor of Chemistry.

3. William Gibson, M. D., Professor of Surgery.

4. William E. Horner, M. D., Professor of Anatomy.

5. Samuel Jackson, M. D., Professor of the Institutes of Medicine.

6. George B. Wood, M. D., Professor of *Materia Medica* and Pharmacy.

7. Hugh L. Hodge, M. D., Professor of Midwifery and the Diseases of Women and Children.

The following table exhibits the number of students who have attended the lectures in this institution, and the number of graduates in each year, from the winter of 1810-11 to that of 1835-6 inclusive.

Winter.	Matriculates.	Graduates.	Winter.	Matriculates.	Graduates.
1810-11	406	65	1823-24	424	96
1811-12	387	70	1824-25	487	111
1812-13	349	61	1825-26	440	114
1813-14	345	62	1826-27	441	131
1814-15	319	44	1827-28	409	133
1815-16	388	70	1828-29	362	109
1816-17	436	74	1829-30	421	127
1817-18	465	87	1830-31	410	151
1818-19	422	102	1831-32	386	134
1819-20	330	78	1832-33	367	117
1820-21	325	66	1833-34	432	145
1821-22	357	77	1834-35	390	135
1822-23	455	101	1835-36	398	132*

\* In the Catalogue for 1836-7,—just published,—the number of matriculates is stated to be 401.



In the twenty-six years, the number of students has consequently amounted to 10,331, and of graduates to 2592; the average number per annum of the former being 398, and of the latter 100. The great increase of the graduates over the matriculates, since the year 1810, is ascribed by the faculty, in a printed valedictory address by Professor Wood, published by their direction, (1836,) to two chief causes: first, to the establishment of other schools, the pupils of which are permitted to become candidates for a degree in the university of Pennsylvania, after attending one full course of lectures, instead of two courses in the latter; and, secondly, to the greater diffusion of knowledge through the community, which renders a degree desirable as an evidence of qualification to practise, where formerly it was deemed of little consequence.

## II. COLLEGE OF PHYSICIANS AND SURGEONS, NEW YORK. (NEW YORK.)

This was the second medical school instituted in America, in the year 1768. Drs. Clossy, Bard, Jones, Middleton, Smith, and John V. B. Tennent, were the first professors. The school was connected with King's—now Columbia—College, and, in 1769, the degree of Bachelor of Medicine was conferred upon Samuel Kissam and Robert Tueker, the first graduates. The school had been in existence but a few years, when its labours were interrupted by the revolutionary war. On the return of peace, various attempts were made to revive it, but, owing to feuds and collisions among the members of the profession, every effort was vain. Private lectures were, however, delivered by many respectable teachers, until, in 1792, a new organisation of a medical school was effected by the trustees of Columbia College, but the advantages accruing from it were deemed by no means commensurate with their expectations, and, accordingly, it was thought expedient to grant a charter, establishing the College of Physicians and Surgeons, in March, 1807. A spirit of rivalry now commenced between the schools, which led to the most unfortunate results; so that, in 1811, the regents were induced to remodel the College of Physicians and Surgeons, with a view to their union with the Medical Faculty of Columbia College, which was effected in 1813. For about seven years from this period, the College of Physicians and Surgeons went on prosperously; but difficulties arose; charges of serious import were brought against the professors—men undoubtedly of talent and respectability: these charges (to use the

language of a medical historian of the times,) on investigation by the regents, in March, 1825, were declared to be unsubstantiated, and were pronounced by that body, in an elaborate report, to have arisen from jealousy and professional rivalry. "Broils and contention, nevertheless, continued, and the opposition persisted systematically in their purpose. In April, 1826, the professors, wearied with unavailing attempts to silence the opposition, came to the conclusion that 'it would best consist with their own self-respect,' to withdraw altogether from the institution; and, accordingly, they tendered the resignation of their professorships and offices. 'The Board of Regents accepted their resignations, April 17, 1826, and presented their thanks 'for the faithful and able manner in which they had filled their respective chairs as instructors and lecturers in the said college.'"

The professors at that time were Drs. Hosack, Macneven, Samuel L. Mitchell, Mott, and Francis; Dr. Post having previously given in his resignation. Through the agency of these gentlemen, an offset from Rutgers' College, at New Brunswick, in New Jersey, was established in New York; but, although the number of students frequenting its halls was considerable, it was necessarily abandoned, owing to the legislature of New York refusing it a charter.

The present faculty are as follows:

1. John Augustine Smith, M. D., Professor of Physiology.
  2. Alexander H. Stevens, M. D., Professor of the Principles and Practice of Surgery.
  3. Joseph M. Smith, M. D., Professor of the Theory and Practice of Physic and Clinical Medicine.
  4. Edward Delafield, M. D., Professor of Obstetrics and Diseases of Women and Children.
  5. John B. Beek, M. D., Professor of Materia Medica and Medical Jurisprudence.
  6. John Torrey, M. D., Professor of Chemistry and Botany.
  7. Valentine Mott, M. D., Professor of Operative Surgery, and Surgical and Pathological Anatomy.
  8. John R. Rhineland, M. D., Professor of Anatomy.
- James Quackenbush and James Bolton, Demonstrators.

The number of students, in the session of 1835-6, was 124; the number of graduates, session 1834-5, was nineteen.

### III. MEDICAL SCHOOL OF HARVARD. (BOSTON.)

This school was first suggested by private munificence. Dr.

Ezekiel Hersey, of Hingham, in Massachusetts, who died in 1770, bequeathed one thousand pounds: and his widow, at her decease, a like sum, to be applied to the establishment of a professorship of anatomy and surgery. His brother, Dr. Abner Hersey, of Barnstable, who died in 1786, and Dr. John Cuming, of Concord, also gave five hundred pounds each, for the same object; and William Erving, Esq., of Boston, bequeathed one thousand pounds towards the endowment of an additional professorship. In 1780, Dr. John Warren, the father of the present professor of anatomy, whilst surgeon of a military hospital in Boston, commenced a course of anatomical lectures, which were attended, in the following year, by the students of the university. Dr. Warren furnished a plan for a medical school, which was adopted, in 1782, by the corporation of Harvard College. He was appointed professor of anatomy and surgery; Dr. Benjamin Waterhouse, professor of the theory and practice of physic; and Dr. Aaron Dexter, professor of chemistry. In consequence of the greater advantages likely to accrue from the lectures being delivered in the city of Boston, the corporation and board of overseers of Harvard University deemed it expedient to remove the medical school to that city, which was done in 1810.

The present faculty are:

1. John C. Warren, M. D., Professor of Anatomy and the Operations of Surgery.
2. John W. Webster, M. D., Professor of Chemistry.
3. Walter Channing, M. D., Professor of Midwifery and Medical Jurisprudence.
4. Jacob Bigelow, M. D., Professor of Materia Medica.
5. George Hayward, M. D., Professor of the Principles of Surgery and Clinical Surgery.
6. John Ware, M. D., Professor of the Theory and Practice of Physic and Clinical Medicine.

The number of students, session 1835-6, was 118.

#### IV. DARTMOUTH COLLEGE, NEW HAMPSHIRE. (HANOVER.)

This was the fourth medical school instituted in the United States. It is situated at Hanover, New Hampshire, and was founded by Dr. Nathan Smith, the father of the present professor of Surgery in the University of Maryland. In 1798, Dr. Smith was appointed sole professor of the school, and for twelve years he gave lectures on the

various departments of medicine, excepting two courses, in which he was assisted in the department of chemistry.

The present faculty are three in number:

1. Reuben Dimond Mussey, M. D., Professor of Anatomy, Surgery, and Obstetrics.

2. Daniel Oliver, M. D., Professor of Physiology, Medical Jurisprudence, Materia Medica, and Intellectual Philosophy.

3. John Delamater, M. D., Professor of the Theory and Practice of Physic.

4. Rev. Benjamin Hale, M. A., Professor of Chemistry, and Lecturer on Geology and Mineralogy.

Two of the professors teach in the academical as well as in the medical department; the medical course occupying but fourteen weeks, whilst the academical embraces the year, with the exception of the vacations.

The number of medical students at this college, session 1836-7, was 86.

#### V. UNIVERSITY OF MARYLAND. (BALTIMORE.)

This school is considered to owe its origin mainly to Dr. John B. Davidge, who, in the year 1804, commenced a course of lectures, in Baltimore, on midwifery, to a class of six students. The year following, he lectured also on anatomy and surgery, to a class of seven students; and, in 1806, to a class of nine. In 1807, Dr. Cooke, of Virginia, and Dr. Shaw, of Maryland, united with Dr. Davidge to form a medical school in Baltimore, and lectures were given on the different branches of medicine. The same year they petitioned the legislature of Maryland for a charter, which was granted, and the school became regularly organised, by the title of the "College of Medicine of Maryland." In the sixteenth section of the charter it was enacted "that, until further arrangements be made by the regents of the said college, John B. Davidge, M. D., and James Cooke, M. D., shall be joint professors of anatomy, surgery, and physiology; George Brown, M. D., professor of the practice and theory of medicine; John Shaw, M. D., Professor of chemistry; Thomas E. Bond, M. D., professor of materia medica; and William Donaldson, M. D., professor of the institutes of medicine. Two of these gentlemen, whose solicitude for the interests of science led them to give their influence for the creation of a medical school in Maryland, had no



desire to engage in the duties of teaching, and the ill health of another required him to retire to a country residence; so that, in the year 1809, the professors were Drs. Davidge, Cooke, Potter, De Butts, and Baker. In 1810, the legislature enlarged the college to a university, by authorising the formation of three other colleges, and ordered that the four colleges be styled the "University of Maryland."

The faculty at present consists of six professors, in the following order of appointment:

1. Nathaniel Potter, M. D., Professor of Pathology and the Theory and Practice of Physic.

2. Richard Wilmot Hall, M. D., Professor of Midwifery, and the Diseases of Women and Children.

3. Nathan R. Smith, M. D., Professor of the Principles and Practice of Surgery.

4. Julius T. Ducatel, M. D., Professor of Chemistry and Pharmacy.

5. Eli Geddings, M. D., Professor of Anatomy and Physiology.

6. Robert Eglesfeld Griffith, Professor of Therapeutics, Materia Medica, Hygiene, and Medical Jurisprudence.

H. Willis Baxley, M. D., Dissector and Demonstrator of Anatomy.

The number of matriculates, session 1835-6, was 120; and of graduates, 46.

#### VI. COLLEGE OF PHYSICIANS AND SURGEONS OF THE WESTERN DISTRICT OF THE STATE OF NEW YORK. (FAIRFIELD.)

In the year 1812, this college was instituted by the regents of the University of the State of New York, and placed under the direction of a board of trustees. In the year following, the school was organised by the trustees, with five professorships. The present professors are:

1. W. Willoughby, M. D., President, and Emeritus Professor of Obstetrics.

2. James Hadley, M. D., Professor of Chemistry.

3. James M'Naughton, M. D., Professor of Anatomy and Physiology.

4. Theodric Romeyn Beck, M. D., Professor of Materia Medica and Medical Jurisprudence.



5. John Delamater, M. D., Professor of the Theory and Practice of Physic.

6. Reuben D. Mussey, M. D., Professor of Surgery and Obstetrics.

The number of students, session 1834-5, was 217.

The college is in Herkimer county, seventy-six miles W. N. W. from Albany.

#### VII. YALE COLLEGE, CONNECTICUT. (NEWHAVEN.)

The medical school of Yale College was incorporated by the legislature in the year 1810, and established at Newhaven, Connecticut. The lectures did not commence until 1813.

The following gentlemen constitute the present faculty:

1. Thomas Hubbard, M. D., Professor of the Principles and Practice of Surgery.

2. Eli Ives, M. D., Professor of the Theory and Practice of Medicine.

3. B. Silliman, M. D., Professor of Chemistry and Pharmacy.

4. William Tully, M. D., Professor of Materia Medica and Therapeutics.

5. J. Knight, M. D., Professor of Anatomy and Physiology.

6. Timothy P. Beers, M. D., Professor of Obstetrics.

The number of students, session 1834-5, was 64; number of graduates, 17.

#### VIII. TRANSYLVANIA UNIVERSITY. (LEXINGTON.)

The medical department of this university was instituted at Lexington, Kentucky, in 1817, and commenced its operations in November of that year. Its rise has been most rapid, and it is now next to the Philadelphia schools in point of numbers. The following is the list of students and graduates since its commencement:

Session.	Students.	Graduates.	Session.	Students.	Graduates.
1819-20	" 37	" 7	1829-30	" 199	" 81
1820-21	" 93	" 13	1830-31	" 210	" 52
1821-22	" 138	" 37	1831-32	" 215	" 74
1822-23	" 171	" 51	1832-33	" 222	" 69
1823-24	" 200	" 47	1833-34	" 262	" 66
1824-25	" 234	" 57	1834-35	" 259	" 83
1825-26	" 281	" 65	1835-36	" 261	" 75
1826-27	" 190	" 53			
1827-28	" 152	" 53		3,330	923
1828-29	" 206	" 40			

*Present Faculty:*

1. Benjamin Winslow Dudley, M. D., Professor of Anatomy and Surgery.

2. Charles Caldwell, M. D., Professor of the Institutes and Clinical Practice, and of Medical Jurisprudence.

3. John Esten Cooke, M. D., Professor of the Theory and Practice of Medicine.

4. William Hall Richardson, M. D., Professor of Obstetries and the Diseases of Women and Children.

5. Charles Wilkins Short, M. D., Professor of Materia Medica and Medical Botany.

6. Lunsford Pitts Vandell, M. D., Professor of Chemistry and Pharmacy.

Robert Peter, M. D., assistant Professor of Chemistry.

## IX. MEDICAL COLLEGE OF OHIO. (CINCINNATI.)

This college was established at Cincinnati in 1818; but it has experienced many changes, and the lectures were suspended for a session. A new charter was, however, obtained from the legislature; since which time, the number attending the school has, with the exception of one or two years, progressively increased. During the last year, a new school was established in Cincinnati, through the agency of some, who were previously prominent professors in the Medical College of Ohio. The present professors are:

1. Jedediah Cobb, M. D. . . . Anatomy and Physiology.

2. John Locke, M. D. . . . Chemistry and Pharmacy.

3. Alban G. Smith, M. D. . . . Surgery.

4. James C. Cross, M. D. . . . Materia Medica.

5. John Moorhead, M. D. . . . Obstetries, and the Diseases of Women and Children.

6. John Eberle, M. D. . . . Theory and Practice of Medicine.

7. John T. Shotwell, A. B. M. D. Adjunct Professor of Anatomy.

Number of students during the session of 1835-6, about 125.

## X. VERMONT ACADEMY OF MEDICINE. (CASTLETON.)

This institution was established at Castleton, Vermont, under the charter of Middlebury College, in 1818.

The present professors are:

1. William Tully, M. D., Professor of the Theory and Practice of Medicine, and Lecturer on Materia Medica and Pharmacy.
2. Theodore Woodward, M. D., Professor of the Principles and Practice of Surgery, Obstetrics and Diseases of Women and Children.
3. John D'Wolf, Jr. A. M., Professor of Chemistry and Natural History.
4. James H. Armsby, M. D., Professor of Anatomy and Physiology.

Number of students, during the spring term of 1836, 79.

#### XI. MEDICAL SCHOOL OF MAINE. (BRUNSWICK.)

This school was established at Brunswick in the year 1820, under the charter of Bowdoin College.

The following are the present professors:

1. Jedediah Cobb, M. D., Professor of Anatomy and Surgery.
2. Henry H. Childs, M. D., Professor of the Theory and Practice of Physic.
3. James M. Keen, M. D., Professor of Obstetrics and Medical Jurisprudence.
4. Parker Cleaveland, M. D., Professor of Materia Medica and Chemistry.

The number of students, during the session of 1835, was 100.

#### XII. BERKSHIRE MEDICAL INSTITUTION. (PITTSFIELD.)

This Institution was established at Pittsfield, Massachusetts, in 1822, under the charter of Williams College, situated at Williamstown, in that state.

The following professors constitute the faculty:

1. H. H. Childs, M. D., Professor of the Theory and Practice of Medicine and Obstetrics.
2. E. Bartlett, M. D., Professor of Pathological Anatomy.
3. David Palmer, M. D., Professor of Materia Medica and Pharmacy.
4. C. Dewey, M. D., Professor of Botany, Chemistry, and Natural Philosophy.

5. William Parker, M. D., Professor of Surgery and Physiology.

6. R. Watts, Jr. M. D., Professor of General and Special Anatomy.

7. Hon. Henry Hubbard, Professor of Legal Medicine. D. Holmes, Demonstrator.

The number of students in attendance during the session of 1836, was 117. Graduates of 1835, 34.

#### XIII. MEDICAL COLLEGE OF SOUTH CAROLINA. (CHARLESTON.)

In the year 1824, the Medical College of South Carolina was established at Charleston. This school proceeded in prosperity until within the last few years, when dissensions arose between the trustees and the faculty: the latter resigned their chairs, and having obtained, in 1832, a charter from the state, commenced a new school, the "Medical College of the State of South Carolina." Since the secession of the old professors, several changes have been made. The following professors constitute the present faculty of the college:

1. William Hume, M. D., Professor of Anatomy.

2. E. Harry Deas, M. D., Professor of Surgery.

3. Thomas Y. Simons, M. D., Professor of the Theory and Practice of Medicine.

4. Francis Y. Porcher, M. D., Professor of Obstetrics and Diseases of Women and Children.

5. Henry Alexander, M. D., Professor of Materia Medica.

6. Charles Davis, M. D., Professor of Chemistry.

The number of students in attendance, during the session of 1834-5, is stated to have been eighteen.

#### XIV. JEFFERSON MEDICAL COLLEGE, (PHILADELPHIA.)

The medical school of Jefferson College—which is seated at Canonsburg, in the western part of Pennsylvania—was established at Philadelphia, in the year 1824. Within the last five years, the rise of this institution has been unexampled. In the session of 1832-3, there were only ninety-six students; in 1833-4, 172; in 1834-5, 233; and, in 1835-6, 364. In the first of these years, the number of graduates was 19; in the last, 134.



The following is the list of professors:

1. Granville Sharp Pattison, M. D., Professor of Anatomy.
2. George M<sup>c</sup>Clellan, M. D., Professor of Surgery:
3. John Revere, M. D., Professor of the Principles and Practice of Physic.
4. Samuel Colhoun, M. D., Professor of Materia Medica and Pharmacy.
5. Jacob Green, M. D., Professor of Chemistry.
6. Samuel M<sup>c</sup>Clellan, M. D., Professor of Midwifery and the Diseases of Women and Children.
7. Robley Dunglison, M. D., Professor of the Institutes of Medicine and Medical Jurisprudence.

#### XV. UNIVERSITY OF VIRGINIA. (CHARLOTTESVILLE.)

When this school was first established, but one medical professor was appointed, to whom every branch of medicine was assigned, except chemistry. The author of this sketch was sole professor from 1825, the year in which the lectures were first delivered, until the session of 1827-8; when, on his proposition, the visitors assigned the departments of practical anatomy and surgery to a demonstrator, and that of materia medica (with his approbation) to the professor of chemistry. Unlike the mass of medical schools, the session of the medical department of the University of Virginia is of the same length as the academic session, ten months. The following gentlemen compose the faculty:

1. John P. Emmet, M. D., Professor of Chemistry and Materia Medica.
2. Alfred T. Magill, M. D., Professor of the Theory and Practice of Medicine, Obstetrics, and Medical Jurisprudence.
3. Augustus L. Warner, M. D., Professor of Anatomy, Physiology, and Surgery.

The number of students in attendance, during the session of 1835-6, was sixty-three.

#### XVI. WASHINGTON MEDICAL COLLEGE. (BALTIMORE.)

This institution, which is an offset of the Washington College, Washington, Pennsylvania, after a career of six years' duration,



obtained, in 1833-4, an act of incorporation from the state of Maryland, empowering the authorities of the college to confer degrees in Medicine.

The present faculty are:

1. James H. Miller, M. D., Professor of Anatomy, Physiology, and Pathology.

2. Samuel K. Jennings, M. D., Professor of Materia Medica, Therapeutics, Hygiène, and Medical Jurisprudence.

3. William W. Handy, M. D., Professor of Obstetrics and the Diseases of Women and Children.

4. John C. S. Monkur, M. D., Professor of the Theory and Practice of Medicine.

5. John P. Mettauer, M. D., Professor of Surgery and Surgical Anatomy.

6. Edward Foreman, M. D., Lecturer on Chemistry.

Washington W. Handy, M. D., Demonstrator of Anatomy.

The number of students in attendance, during the session 1835-6, was about twenty.

#### XVII. MEDICAL COLLEGE OF GEORGIA. (AUGUSTA.)

In the year 1828, a medical institution was commenced at Augusta, Georgia, under the name of the "Medical Academy," by Dr. Antony. As this did not succeed, or at least was not encouraged by a reciprocity of favours from the other medical establishments of the country, the charter was extended by the legislature of Georgia, in the session of 1829-30, so as to enable the college to grant degrees, under the same regulations as other medical colleges. The first course of lectures was delivered in the winter of 1832-3.

#### *Present Faculty:*

1. Alexander Cunningham, M. D., Professor of the Theory and Practice of Medicine.

2. Paul F. Eve, M. D., Professor of Surgery.

3. A. Dugas, M. D., Professor of Anatomy.

4. Joseph Eve, M. D., Professor of Materia Medica.

5. Milton Antony, M. D., Professor of Obstetrics, &c.

6. Lewis Ford, M. D., Professor of Chemistry.

XVIII. MEDICAL COLLEGE OF THE STATE OF SOUTH CAROLINA.  
(CHARLESTON.)

In consequence of difficulties originating between the Faculty of the Medical College of South Carolina, (No. XIII.) and the Medical Society of the State—the governing body, in the year 1832, the former resigned their professorships, and obtained from the legislature a charter for a college under the above title. This was organised in 1833.

*Present Professors.*

1. G. Edwards Holbrook, M. D., Professor of Anatomy.
2. John Wagner, M. D., Professor of Surgery.
3. S. Henry Dickson, M. D., Professor of the Institutes and Practice of Medicine.
4. Henry R. Frost, M. D., Professor of Materia Medica.
5. G. A. Shepard, M. D., Professor of Chemistry.
6. Thomas G. Prioleau, M. D., Professor of Obstetrics, &c.
7. James Moultrie, M. D., Professor of Physiology.
8. John Bellinger, M. D., Demonstrator of Anatomy.

The number of students in attendance in 1835-6, was 129; number of graduates, session 1834-5, 38.

XIX. MEDICAL COLLEGE OF LOUISIANA. (NEW ORLEANS.)

This school was instituted in the autumn of 1834, in New Orleans, with the above title, and it has since been endowed by the state legislature with corporate privileges.

The following professors compose the faculty:

1. Charles A. Luzenburg, M. D., Professor of the Principles and Practice of Surgery.
2. Edward H. Barton, M. D., Professor of the Theory and Practice of Medicine and Clinical Practice.
3. W. Byrd Powell, M. D., Professor of Chemistry and Pharmacy.
4. J. Harrison, M. D., Professor of Physiology and Pathology.
5. J. Monroe Maekic, M. D., Professor of Materia Medica, Therapeutics, and Medical Jurisprudence.
6. Thomas R. Ingalls, M. D., Professor of Obstetrics, and Diseases of Women and Children.

7. C. A. Luzenburg, M. D., Professor of Anatomy, (*ad interim.*)

XX. MEDICAL INSTITUTION OF GENEVA COLLEGE, NEW YORK. (GENEVA.)

The trustees of Geneva College, at Geneva, on the Seneca Lake, have established a Medical department; the number of students at which, during the last session, was sixty-eight; and of graduates, six.

*Present Professors.*

1. E. Cutbush, M. D., Professor of Chemistry.
2. Thomas Spencer, M. D., Professor of the Institutes and Practice of Medicine.
3. W. Parker, M. D., Professor of Anatomy and Physiology.
4. John George Morgan, M. D., Professor of the Principles and Practice of Surgery.
5. Charles B. Coventry, M. D., Professor of Obstetrics and Materia Medica.
6. A. Coleman, M. D., Professor of Medical Jurisprudence and Botany.

XXI. MEDICAL DEPARTMENT OF CINCINNATI COLLEGE. (CINCINNATI.)

The medical department of this college was instituted last year, under the following professors.

1. Joseph A. McDowell, M. D., Professor of Special and Surgical Anatomy.
2. Samuel D. Gross, M. D., Professor of General and Pathological Anatomy, Physiology, and Medical Jurisprudence.
3. Willard Parker, M. D., Professor of Surgery.
4. Landon C. Rives, M. D., Professor of Obstetrics, and the Diseases peculiar to Women and Children.
5. James B. Rogers, M. D., Professor of Chemistry and Pharmacy.
6. John P. Harrison, M. D., Professor of Materia Medica.
7. Daniel Drake, M. D., Professor of the Theory and Practice of Medicine.

John L. Reddel, M. A., Adjunct Professor of Chemistry and Lecturer on Botany.

The number of students in attendance during the course was sixty-six.

XXII. VERMONT MEDICAL COLLEGE. (WOODSTOCK.)

This school was ineorporated by the legislature of Vermont, in October, 1835, with the power of eonferring degrees. It is eonneeted, like the Vermont Aeademy of Medicine (No. x.) with Middlebury College.

*Present Faculty.*

1. H. H. Childs, M. D., Professor of the 'Theory and Praetice of Medieine, and Obstetries.
  2. Willard Parker, M. D., Professor of Physiology and Surgery.
  3. David Palmer, M. D., Professor of Chemistry and Materia Medica.
  4. Robert Watts, M. D., Professor of Anatomy.
  5. Norman Williams, A. M., Professor of Medieal Jurisprudence. Otis Parham, Demonstrator of Anatomy.
- Number of students, 1836, 77. Graduates of 1835, 16.

XXIII. WILLOUGHBY UNIVERSITY, OHIO. (CHAGRINE.)

The medieal department of this university was founded in 1834.

*Present Professors.*

1. A. Trowbridge, M. D., Professor of Surgery and Medieal Jurisprudence.
2. Daniel S. M. Peixotto, M. D., Professor of the 'Theory and Praetice of Physie.
3. J. S. Russell, M. D., Professor of Chemistry.
4. H. A. Aekerly, M. D., Professor of Anatomy and Physiology.
5. William M. Smith, M. D., Professor of Materia Medica.
6. Daniel S. M. Peixotto, M. D., pro. tem. Professor of Obstetries and Diseases of Women and Children.

Number of students, session 1835-6, 23; number of graduates, 5.

There are, eonsequently, in the United States, not fewer than twenty-three eolleges eapable of eonferring medieal degrees; and these are attended during the session by no fewer than 2,500 stu-

dents, of whom at least 6 or 700 may receive degrees. The two schools of Philadelphia alone furnish a little less than one-third. This may seem an inordinate supply of practitioners; but it does not appear to be too great; not greater than in England, if we reckon the apothecaries—who are sub-physicians, as it were, or the regular family attendants,—the practice of the physicians and surgeons being largely restricted to consultation, or to advice given at their own habitations. The apothecary of the United States corresponds to the pharmacien of France: he neither visits the sick nor prescribes at the counter. Every candidate, too, for graduation is compelled to exhibit his qualifications for practising both medicine and surgery, for although some may devote themselves more especially to the latter branch, their medical education does not differ from that of the practitioner who confines himself to medicine. They are all educated, in other words, for the general exercise of the duties of their profession.

All the institutions are organised upon the same general plan, although they may differ in the number of professorships, and in the facilities which they afford for the study of the more practical parts of the profession.

The fees for attendance on lectures vary greatly in the different schools. In the oldest institution in the country—the University of Pennsylvania—and in the University of Maryland, they amount to 120 dollars; whilst there are schools in which they do not amount to more than 55 dollars, (Willoughby University;) 50 dollars, (Berkshire Medical Institution, Dartmouth College, and Medical School of Maine;) and even 45 dollars, (Vermont Medical College, and Vermont Academy of Medicine.) The fee for the diploma likewise varies from 40 dollars, (University of Pennsylvania;) to five dollars, (University of Virginia.)

The session of the chief Medical Schools generally commences about the 1st of November, and terminates on the last day of February. Recently, the University of Pennsylvania has extended the session to the end of March. The anatomical rooms are sometimes opened earlier than the commencement of the session. This is the case with the Jefferson Medical College of Philadelphia, at which lectures are regularly delivered during the month of October, but these lectures are extra: they do not interfere with the integrity of the course, which commences in the last week of October, and attendance upon them is not essential to graduation.



*Table of the Dates at which the Lectures commence in the different Institutions for Medical Instruction in the United States.*

1. University of Pennsylvania . . .	at Philadelphia,	First Monday in November.
2. College of Physicians and Surgeons, New York . . .	New York,	Ditto. Ditto.
3. Medical School of Harvard . . .	Boston,	First Wednesday in Novemb.
4. Dartmouth College, New Hampshire . . . . .	Hanover,	First Week in August. Session 14 Weeks.
5. University of Maryland . . .	Baltimore,	Last Monday in October.
6. College of Physicians and Surgeons of the Western District of the State of New York . . . . .	Fairfield,	First Tuesday in October.
7. Yale College, Connecticut . . .	New Haven,	Last week in October.
8. Medical College of Ohio . . .	Cincinnati,	Last Monday in October.
9. Vermont Academy of Medicine . . .	Castleton,	Second Thursday in August, and a spring term beginning on the second Thursday in March. Each session of 14 weeks.
10. Transylvania University . . .	Lexington,	First Monday in November.
11. Medical School of Maine . . .	Brunswick,	Third Monday of February. Session 3 months.
12. Berkshire Medical Institution, Massachusetts . . .	Pittsfield,	Last Thursday in August, session 13 Weeks.
13. Medical College of South Carolina . . . . .	Charleston,	Second Monday in November.
14. Jefferson Medical College . . .	Philadelphia,	The regular series, in the first week of November.
15. University of Virginia . . .	Charlottesville	First of September.
16. Washington Medical College . . .	Baltimore,	Last Monday in October.
17. Medical College of Georgia . . .	Augusta,	In October.
18. Medical College of the State of South Carolina . . . . .	Charleston,	Second Monday in November.
19. Medical College of Louisiana . . .	New Orleans,	First Monday in December.
20. Medical Institution of Geneva College, New York . . .	Geneva,	First Tuesday in October.
21. Cincinnati College . . . . .	Cincinnati,	Last Monday in October.
22. School of Medicine at Woodstock, Vermont . . . . .	Woodstock,	Second Thursday in March.
23. Willoughby University . . . . .	{ Chagrine, Lake Erie,	First of November.

*Baltimore; June 10th, 1836.*

The following are the published regulations, at present in force, in relation to the acquisition of the doctorate in the University of Pennsylvania.

I. Every candidate for the degree must have attained the age of twenty-one years, applied himself to the study of medicine for three years, and been, during that time, the private pupil, for two years at least, of a respectable practitioner of medicine.

II. Preparatory to obtaining his tickets, the student must matriculate, by having his name registered by the Dean of the Medical Faculty.

III. The candidate must have attended two complete courses of the following lectures in this institution.

Anatomy,

Practice of Physic,

Materia Medica and Pharmacy,

Chemistry,

Surgery,

Midwifery, and the Diseases of Women and Children, and

Institutes of Medicine.

He must also have attended one course of Clinical Instruction, in the Philadelphia Hospital (Blockley,) or the Pennsylvania Hospital, or some other institution approved of by the Faculty of Medicine.

IV. Medical students who have attended one complete course, in a respectable medical school, where the attendance on two complete courses is necessary to a degree, where the same branches are taught as in this, and which is placed on the *ad eundem* of this school, are permitted to become candidates by attendance here for one full course only, and have the same privilege with students who have attended this school twice.

V. When the candidates for a medical degree apply to the dean for admission to an examination, they must exhibit their tickets and certificates to prove that these qualifications have been observed.

VI. Each candidate, at the time of his application, must deliver to the dean of the faculty a medical thesis composed by himself. This thesis is referred to one of the professors, who shall examine the candidate thereon, and report the same to the medical faculty.

VII. When a candidate is rejected, his thesis will be retained by the medical faculty.

VIII. When candidates withdraw their theses, for any purpose whatever, they, on re-application, will be placed at the foot of the list.

IX. The thesis must be in the candidate's own handwriting, and must be written uniformly on paper of the same size, the alternate pages being left blank. General bad spelling in it, or general inattention to the rules of grammar, will be sufficient ground to exclude a candidate from examination for a degree.

X. When a thesis is published by the candidate, the permission of the professor, by whom he was examined thereon must be ob-

tained, and no alteration without his consent, shall be made therein after such permission is given.

XI. The voting on the case of each candidate is by private ballot, and three negative votes reject him.

XII. Each candidate shall pay the fees of graduation, at the time of having the success of his examination announced to him by the Dean.

XIII. Candidates, who have passed their examination, and in other respects complied with the regulations, must be reported by the Dean to the Provost, who in turn will communicate such report to the Board of Trustees, in order that if approved of by them, their mandamus be issued for conferring the degree at such time as they may think expedient.

XIV. The degree will not be conferred upon a candidate who absents himself from the public commencement, except by a special permission of the medical faculty.

XV. Graduates of medical schools, on the *ad eundem* list, by attending one complete course in this institution, are put upon the same footing with students, who have attended two complete courses here.

The regulations of the Jefferson Medical School, of the College of Physicians and Surgeons of the city of New York, and of the Western and Southern Medical Schools are in all essential respects the same as those of the University of Pennsylvania. The examinations in the first of these institutions, are, however, peculiar. Those of the University of Pennsylvania, and of the other medical schools of the union, are altogether oral. At the Jefferson School they are oral or written, at the option of the candidate. The following account of the plan, adopted in this school, is from their 'announement' for the session, 1836-7.\*

\* "The officers of Jefferson Medical College would particularly solicit the attention of the Profession to the mode of examination for the degree of M. D., which they have lately adopted. Every one acquainted with the subject is aware of the great difficulty of fixing a standard, by which the qualifications of the candidate shall be fairly determined, so that equal justice shall be done to the public and individuals. Oral examinations, after a certain routine of study, have been heretofore universally relied upon in the United States. This mode of examination is admitted to be very imperfect, and obnoxious to many serious objections. It is in itself extremely tedious, necessarily consuming, where the class is large, a great length of time, each candidate requiring, at least, from an

The following are the regulations for graduation in the medical department of the University of Maryland.

1. Any student, who desires to become a candidate, must exhibit the tickets of admission to the different lectures to the Dean.

2. He must have attended two full courses of all the lectures deliver-

hour and a quarter, to an hour and a half. The situation of the candidates is embarrassing; some become agitated and lose their self-possession, and are thus unable to do justice to themselves; others again, by appearing to be so, enlist the feelings of the examiners, and, by their address, elude scrutiny; while, however conscientious and upright in his intentions, the examiner must have the common sympathies of our nature, and is therefore always liable to be suspected of favoritism or prejudice. These, and many other unanswerable objections, may be urged against oral examinations, as tests of medical qualifications. The following plan of written examinations was pursued, with about two-thirds of the candidates, at their last graduation. The mode being unusual, the candidates were allowed a choice of an oral or written examination. when 86 preferred the latter. Preparatory to the written examination, the candidates were requested to send to the Dean a sealed note, with their names written on the inside; on the outside was written a motto or sentence. A day was then set apart for each Professor to examine on his branch. The evening before meeting the class, the Professor prepared from 20 to 40 comprehensive questions, on various subjects relating to his department. A sufficient number of copies was printed, by a confidential person, and delivered to the Professor. The class was assembled at 10 o'clock A. M. the next day, in the lecture room, prepared for their examination; when a copy of the questions was handed to each candidate, by the Professor in the presence of his colleagues. The candidates were distributed over the room, so that they could hold no intercourse with each other; each being provided with a small copy book, on which was written the motto already handed to the Dean, and with pen and ink. They were informed that the answers were expected to be full and satisfactory. It was announced that any attempt to whisper, or to communicate information to each other, or the use of any book, would, if discovered, be considered sufficient ground for the unqualified rejection of the individual. They were at liberty to take what time they required; but, after finishing their tasks, the book, containing the answers to the questions, was to be deposited in a covered basket placed upon the table. During the time they were thus employed, one or more of the Professors was constantly present in a part of the room where every candidate was under his direct surveillance. No candidate left the room, but for a few moments, with permission, until his task was completed.

From the novelty of this mode of examination, the Professors were apprehensive that some inconvenience might practically arise. It was most gratifying, however, to find that none was actually felt. The moment the printed copies of the questions were received, the candidates proceeded, with the regularity of so many well trained Clerks, to the accomplishment of their task. Instead of attempting to prompt each other, each seemed conscious that he had quite sufficient employment in attending to his own affairs, and, by the time the questions



ed in the Institution; one course of practical anatomy under the Demonstrator of the University, and one course of clinical instruction at the Infirmary.

Students, who have attended a full course of medical lectures in any respectable school, are permitted to become candidates after attending one full course of the lectures in the medical department of the University of Maryland.

Each candidate must deliver to the Dean an inaugural dissertation, of his own composing, on some medical subject. Should the candidate be rejected, his essay will be returned to him.

The dissertation must be in the candidate's own writing, and must be written correctly and on appropriate paper.

The order in which the candidates shall present themselves for examination will be determined by lot, on the 15th day of February, the candidate delivering in his inaugural dissertation, at the time, to the Dean.

Each candidate shall pay to the Dean of the Faculty the fees for graduation, at the time of his examination.

The degree will not be conferred upon any candidate—although he may have been successful in his examinations—who may absent himself from the Public Commencement, except by special permission of the Medical Faculty.

A medal shall be awarded to the writer of the best Latin dissertation,—the announcement to be made on the day of the public commencement.

Graduates of respectable medical schools are permitted to attend

were answered, they were quite fatigued enough to feel no desire of remaining longer in the room. The book of answers was deposited in the covered basket and the candidate retired. The examination began at 10 o'clock in the morning, and generally it was about five before the last candidate, and with him the Professors, left the room. The basket containing the written answers was sent to the Professor's house, who, after carefully examining them, wrote down his judgment of each. On this decision the vote was taken, without the name of the candidate being known.—This course was pursued, successively, by each Professor.

It will be perceived that the excellence of this mode of examination mainly depends on the questions being entirely unknown until they are presented in the examining room, and the candidate having no extrinsic aid from books or prompting. Such were the precautions, that these were entirely impracticable. At the same time, they must do the candidates the justice to say, that not the slightest disposition to take any undue advantage was shown by a single individual within the knowledge of the Professors."



all the lectures, on payment of a fee of twenty dollars to the Medical Faculty.

According to the regulations of the Medical School of Harvard University:—

Every candidate for the degree of Doctor of Medicine must comply with the following conditions before being admitted to a private examination, viz:

He shall satisfy the faculty that he has arrived at the age of twenty-one.

He shall have attended two courses of the lectures delivered at the Massachusetts Medical College by each of the Professors. Except that if he have attended a course of similar lectures in any other college or university, the same may take the place of one of the above courses.

He shall have employed three years in his professional studies under the direction of a regular practitioner of medicine.

If he has not received a university education, he shall satisfy the Faculty of Medicine in respect to his knowledge of the Latin language, and experimental philosophy.

He shall, four weeks previous to the day on which he presents himself for examination, have given notice of his intention to the Dean of the Faculty, and at the same time shall have delivered or transmitted to the Dean, a dissertation written by himself, on some subject connected with medicine.

In the University of Virginia—as was remarked in an early part of this volume—no length of study is demanded. The candidate is admitted to an examination during the first year of his attendance, should he feel qualified and desire it.



# ADDENDA.

## RECENT CHANGES IN MEDICAL SCHOOLS.

THE whole of this work, as the date of the preface sufficiently indicates, has been printed since the month of March; but it has not been issued in consequence of the difficulties arising from the pressure of the times. Since then changes unusually numerous have been made in various medical schools. These it is esteemed proper to add here, with a reference to the page in the body of the work in which the particular school is noticed.

### II. COLLEGE OF PHYSICIANS AND SURGEONS, NEW YORK, *p.* 294.

Dr. Alban G. Smith (formerly of the Medical College of Ohio) has been appointed Professor of the Principles and Practice of Surgery, in place of Dr. A. H. Stevens, M. D., resigned.

### V. UNIVERSITY OF MARYLAND, (BALTIMORE.) *p.* 296.

The whole of the old Faculty have resigned. The following is the present Faculty:

1. H. Willis Bixley, M. D., Professor of Anatomy and Physiology.
2. Henry Howard, M. D., Professor of Obstetrics and of the Diseases of Women and Children.
3. Michael A. Finley, M. D., Professor of Pathology and the Practice of Medicine.
4. Robert E. Dorsey, M. D., Professor of Materia Medica, Therapeutics, Hygiene and Medical Jurisprudence.
5. W. R. Fisher, M. D., Professor of Chemistry and Pharmacy.
6. John Frederick May, M. D., Professor of the principles and Practice of Surgery.
- Ellis Hughes, M. D., Dissector and Demonstrator of Anatomy.
- Fee for each Professor, 15 dollars.

### VIII. TRANSYLVANIA UNIVERSITY, (LEXINGTON, KY.) *p.* 298.

All these chairs having been vacated by the Board of Trustees, the following new appointments have been made:

1. Benjamin Winslow Dudley, M. D., Professor of Anatomy and Surgery.
2. James B. Bush, M. D., Adjunct Professor of Anatomy.
3. James Conquest Cross, Professor of the Institutes and Clinical Practice, and of Medical Jurisprudence.
4. John Eberle, M. D., Professor of the Theory and Practice of Medicine.
5. William Hall Richardson, M. D., Professor of Obstetrics and the Diseases of Women and Children.
6. Charles Wilkins Short, M. D., Professor of Materia Medica and Medical Botany.
7. Thomas D. Mitchell, M. D., Professor of Chemistry and Pharmacy.

### IX. MEDICAL COLLEGE OF OHIO, (CINCINNATI.) *p.* 299.

Several of the Professors in this School have resigned, and, at this date, their places have not been supplied. Drs. Cobb and Loeke have received appointments in the Louisville Medical School. Dr. Alban G. Smith has been transferred to the College of Physicians and Surgeons, New York; and Drs. Cross and Eberle have accepted appointments in the Transylvania Medical School.

### XIII. MEDICAL COLLEGE OF SOUTH CAROLINA, (CHARLESTON.) *p.* 301.

Dr. Charles Davis having resigned the Chair of Chemistry, Dr. William Hume has been transferred from the Chair of Anatomy to that of Chemistry and Pharmacy, and Dr. B. B. Strobel has been appointed Professor of Anatomy.

### XV. UNIVERSITY OF VIRGINIA, (CHARLOTTESVILLE.) *p.* 302.

Robert E. Griffith, M. D., (previously of the University of Maryland,) Professor of Theory and Practice of Medicine, &c., in the place of Alfred T. Magill, M. D., deceased.

James L. Cabell, M. D., Professor of Anatomy, Physiology, and Surgery, in the place of Augustus L. Warner, M. D., resigned.

## XVI. WASHINGTON MEDICAL COLLEGE, (BALTIMORE.) p. 302.

J. R. W. Dunbar, M. D., Professor of Surgery and Surgical Anatomy, in place of John P. Mettauer, M. D., resigned.

## XVII. MEDICAL COLLEGE OF GEORGIA, (AUGUSTA.) p. 303.

Two new Professorships have been added to this School; the one of *Physiology and Pathological Anatomy*; the other of *Institutes of Medicine and Medical Jurisprudence*. To the former, Dr. George M. Newton, Adjunct Professor of Anatomy and Physiology, has been appointed; to the latter, Dr. Lewis D. Ford, previously Professor of Chemistry in the Institution. The Chair of Chemistry has been filled by the appointment of Dr. Charles Davis, previously Professor of Chemistry in the Medical College of South Carolina.

## XVIII. MEDICAL COLLEGE OF THE STATE OF SOUTH CAROLINA, (CHARLESTON.) p. 304.

A Chair of Pathological Anatomy and Medical Jurisprudence has been added to this college, to which Dr. Eli Geddings, previously Professor of Anatomy and Physiology in the University of Maryland, has been appointed.

E. Wurdeimann, M. D., Demonstrator, in place of John Bellinger, M. D.

## XIX. MEDICAL COLLEGE OF LOUISIANA. (NEW ORLEANS.) p. 304.

W. Stone, M. D., Professor of Surgery, in place of Charles A. Luzenburg.

J. L. Riddell, M. D., Professor of Chemistry and Pharmacy, in place of W. Byrd Powell, M. D.

J. Jones, M. D., Professor of Obstetrics and Diseases of Women and Children and Clinics, in place of Thomas R. Ingalls, M. D.

Warren Stone, M. D., Professor of Anatomy.

## XX. MEDICAL INSTITUTION OF GENEVA COLLEGE, NEW YORK, (GENEVA.)

James Webster, M. D., has been appointed Professor of Anatomy and Physiology, in the place of W. Parker, M. D. The same gentleman will also deliver the Lectures on Surgery the ensuing term, in place of Dr. Morgan, resigned.

The Professorship of Medical Jurisprudence and Botany has been discontinued.

## XXI. MEDICAL DEPARTMENT OF CINCINNATI COLLEGE, (CINCINNATI.)

Dr. John L. Riddell, Adjunct Professor of Chemistry and Lecturer on Botany, has been appointed to the Chair of Chemistry and Pharmacy in the Medical College of Louisiana.

Dr. Trimble is Demonstrator of Anatomy.

## NEW SCHOOL.

## LOUISVILLE MEDICAL INSTITUTE, (LOUISVILLE.)

A Faculty has been recently appointed, connected with this Institute.

1. Jedediah Cobb, M. D., (previously of the Medical College of Ohio,) Professor of Anatomy.

2. Joshua B. Flint, M. D., (lately of Boston,) Professor of Surgery.

3. Charles Caldwell, M. D., (previously of the Transylvania University,) Professor of the Institutes of Medicine and Clinical Practice.

4. John E. Cooke, M. D., (lately of the Transylvania University,) Professor of the Theory and Practice of Medicine.

5. Lunsford P. Yandell, M. D., (lately of the Transylvania University,) Professor of Materia Medica.

6. Henry Miller, M. D., Professor of Obstetrics and Diseases of Women and Children.

7. John Locke, M. D., (of the Medical College of Ohio,) Professor of Chemistry and Pharmacy.

N. B. Dr. Locke is at this time in Europe. The Trustees appointed him, believing, from the assurances of his friends, that he would accept. Should he decline, Chemistry will be taught during the ensuing winter by Dr. Yandell.

The above comprise all the changes that have come to the author's knowledge.

PHILADELPHIA, September 6, 1837.

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